

The Assembly met at 1:30 p.m.

Prayers

ROUTINE PROCEEDINGS

PRESENTING PETITIONS

Mr. Krawetz: — Thank you very much, Mr. Speaker. Mr. Speaker, I have a petition to present on behalf of the Saskatchewan Disenfranchised Widows Action Group. The prayer reads as follows:

Wherefore your petitioners humbly pray that your Hon. Assembly may be pleased to have the Workers' Compensation Board Act amended whereby benefits and pensions are reinstated to disenfranchised widows and whereby all revoked pensions are reimbursed to them retroactively with interest to April 17, 1985.

And as in duty bound, your petitioners will ever pray.

Mr. Speaker, signatures on this petition all come from the city of Saskatoon.

I so present.

Mr. D'Autremont: — Mr. Speaker, I also have petitions to present today on behalf of Saskatchewan's disenfranchised widows. The prayer reads:

Wherefore your petitioners humbly pray that your Hon. Assembly may be pleased to have the Workers' Compensation Board Act amended whereby benefits and pensions are reinstated to disenfranchised widows and whereby all revoked pensions are reimbursed to them retroactively with interest to April 17, 1985.

And as in duty bound, your petitioners will ever pray.

These petitions come from the Saskatoon area, Mr. Speaker, and I believe also from the Estevan area.

I so present.

Mr. Toth: — Thank you, Mr. Speaker. Mr. Speaker, reading a petition in regards to real farm safety net program. Reading the prayer:

Wherefore your petitioners humbly pray that your Hon. Assembly may be pleased to cause the government to demand that the federal government work with Saskatchewan to put in place a farm aid package that provides real relief for those who need it, and that the provincial government develop a long-term farm safety net program as it promised to do when it cancelled GRIP against the wishes of farmers.

And as in duty bound, your petitioners will ever pray.

And, Mr. Speaker, the petition I present today is signed by individuals from the communities of Stockholm, Langenburg and Esterhazy.

I so present.

Mr. Gantefer: — Thank you, Mr. Speaker. I too rise to present a petition in support of Saskatchewan's disenfranchised widows. The prayer reads as follows:

Wherefore your petitioners humbly pray that your Hon. Assembly may be pleased to have the Workers' Compensation Board Act amended whereby benefits and pensions are reinstated to disenfranchised widows and whereby all revoked pensions are reimbursed to them retroactively with interest to April 17, 1985.

Signatures on this petition, Mr. Speaker, are all from the Saskatoon area.

I so present.

Mr. Osika: — Thank you, Mr. Speaker. I am pleased to rise on behalf of farmers of the province of Saskatchewan with a petition. And the prayer reads:

Wherefore your petitioners humbly pray that your Hon. Assembly may be pleased to call upon provincial and federal governments to immediately take steps to end unfair world subsidies and provide farmers with prompt relief from declining incomes, and act as watchdogs against rising input costs which are harming the rural economy.

And as in duty bound your petitioners will ever pray.

And the signatures are from the good people of Melville, Neudorf, Lemberg, and Duff. Thank you, Mr. Speaker.

Mr. Hillson: — Thank you, Mr. Speaker. This afternoon I rise to present petitions from citizens concerned about the state of our highway system. The prayer of relief reads as follows:

That we call on our governments to dedicate a significantly greater portion of fuel tax revenue towards road maintenance and construction so Saskatchewan residents may have a safe highway system.

Your petitioners come from North Battleford, Battleford, Pentane, and especially Lloydminster where there are a lot of concerned citizens.

Ms. Haverstock: — Thank you very much, Mr. Speaker. I'm honoured once again to present petitions on behalf of those who are concerned with the education of children with special needs in our province. And I'll read the prayer:

Wherefore your petitioners humbly pray that your Hon. Assembly may be pleased to cause the government to provide essential funding and ensure the delivery of scientifically proven, diagnostic assessment and programming for children with learning disabilities in order that they have an access to an education that meets their needs and allows them to reach their full potential.

And as in duty bound your petitioners will ever pray.

The people who have signed this petition, Mr. Speaker, today are from Choiceland, Shipman, Regina, Saskatchewan.

And I present on their behalf with pleasure.

Ms. Julé: — Thank you, Mr. Speaker. Mr. Speaker, I rise today on behalf of Saskatchewan citizens who want to see meaningful legislation enacted to protect children at risk due to the child prostitution trade. And the prayer reads as follows, Mr. Speaker:

Wherefore your petitioners humbly pray that your Hon. Assembly may be pleased to cause the government to enact provincial legislation that would inject a stay-away order restraining anyone who interferes with the healing process of victims of child prostitution; anyone who threatens in any way the healing while it is taking place is subject to a large fine; provide police with the authority to search a place where they believe a child is being held by pimps or perpetrators of this crime for the purpose of engaging in child prostitution activities.

And the signators on this petition, Mr. Speaker, are from Kennedy, Langbank, Kipling, Wawota, Keels and Regina; a total of 100 signatures added to those already presented in the legislature.

I so present.

READING AND RECEIVING PETITIONS

Deputy Clerk: — According to order the petitions presented at the last sitting have been reviewed and found to be in order. Pursuant to rule 12(7) these petitions are hereby received.

INTRODUCTION OF GUESTS

Mr. Trew: — Thank you, Mr. Speaker. Today it's my great pleasure to introduce to you and through you to all members of the Assembly a group of students seated in the west gallery.

There are 15 students there from O'Neill High School right in the constituency of Regina Coronation Park. But in addition, there's 21 students from the Bayonne area of France. These students are part of a French exchange program, and the first part of it is here in Canada and then later on I understand many of the O'Neill students are going to go back to the Bayonne area and pay a visit there.

With these students there are teachers Denis Genets from O'Neill here in town and Mrs. Patricia Leblanc and Mrs. Martine Pasquerom who is from France.

Mr. Speaker, I will be meeting with this group about 2:30 and I very much look forward to visiting with them and dealing with any questions or comments that they might have at that time. I ask all hon. members to join me in welcoming our visitors to the Assembly today.

Hon. Members: Hear, hear!

Mr. D'Autremont: — Thank you, Mr. Speaker. On behalf of the official opposition I would like to join with our colleague in

welcoming the students and chaperons from France. Je vous souhaiter bienvenue en Saskatchewan.

Hon. Members: Hear, hear!

Hon. Mr. Wiens: — Mr. Speaker, I happen to be privileged to come from a very large family of relatives and one of them is in the gallery today — Charlene Krahn. Charlene's grandmother and my father were cousins so you know how far the relationship goes. She is today with her friend, Lisa, and baby, Hanna Gibbins. Mr. Speaker, I'd ask all members of the legislature to join me in welcoming these young people to the legislature.

Hon. Members: Hear, hear!

Mr. Hillson: — Mr. Speaker, as has been pointed out, we are graced with the presence of many young people. On behalf of the Liberal Party I also want to add our welcome here this afternoon, and especially to our young friends from France — bienvenue.

Hon. Members: Hear, hear!

Mr. Trew: — Mr. Speaker, with late breaking news. It's my pleasure, on behalf of the Deputy Premier to introduce a group of 24 students seated also in the west gallery, and these are grade 7 and 8 students. They're from Herchmer School. And their teacher with them today is Aaron Anderson, and the chaperon is Lynn Pichette.

I gather that there is a visit with the MLA (Member of the Legislative Assembly) around 2:30 and hopefully the Deputy Premier or appointee will be able to join them at that time. But I ask all members to join me in welcoming this fine group from Herchmer School.

Hon. Members: Hear, hear!

STATEMENTS BY MEMBERS

Salvation Army Luncheon

Mr. Toth: — Thank you, Mr. Speaker. Mr. Speaker, it is my pleasure along with the Leader of the Official Opposition, to attend a luncheon — and I believe the Minister of Social Services — of the Salvation Army.

Mr. Speaker, I think each and every one of us in this Assembly here this afternoon know what work the Salvation Army has done not only in our province but across this great nation and certainly worldwide.

Mr. Speaker, just a few facts. Did you know that in 1998 the Salvation Army in southern Saskatchewan helped 5,700 families, 8,700 adults, supplied 12,500 children with food and clothing, gave out 6,100 toys during their Christmas program. As well, over 15,000 hours of volunteer time have been given to the Army.

Mr. Speaker, the table I was at this morning we talked about the current situation in Kosovo, and I am sure we're all well aware of the fact that even in situations of trauma throughout the

world, the Salvation Army has been there to provide not only for the physical, but the spiritual well-being of individuals.

Today I think it would remiss if we did not say thank you to such a fine organization for the humanitarian work they do for all mankind.

Some Hon. Members: Hear, hear!

Harris Area Business Loans Association Program Recognized

Hon. Mr. Wiens: — Thank you, Mr. Speaker. Last Friday I was privileged to attend a gathering in a farm shop at Harris of the Eagle Creek Rural Development Corporation to celebrate the new jobs they have created through the Small Business Loans Association.

This group has created 33 jobs through the energies of this very co-operative community, with businesses including a hair salon, grocery store, home improvement operations, and a custom ag operator.

I had the honour of presenting Norm McFarlane, Chair of the Eagle Creek Rural Development Corporation, with a certificate acknowledging their success in creating jobs which I'm told will soon increase to approximately 43.

The Eagle Creek RDC (rural development corporation) noted that this year's budget doubles the available funds for the SBLA (Small Business Loans Association) to make loans up to a maximum of \$10,000 from a pool of 100,000 from 5 and 50.

The Eagle Creek RDC was formed in the early '90s and is made up of the town of Zealandia, the village of Harris, the RM (rural municipality) of Harris, as well as a portion of the RM of Marriott.

Currently this RDC has 19 entrepreneurs using the SBLA program; 14 of these are new businesses and five were already in existence. Since its inception, it has loaned approximately \$92,000 to help new businesses and expansions and it's very proud to report that there has not been one failure in any of these loans.

This is truly a remarkable achievement for a rural business organization that has proven the vitality of rural economic development.

Congratulations to Norm McFarlane and the Eagle Creek Rural Development Corporation for their part in building Saskatchewan.

Some Hon. Members: Hear, hear!

Funding for Emergency Services

Mr. Hillson: — Mr. Speaker, recently Battleford's residents were hit by an increase in the cost of ambulance service. The cost of a basic ambulance call has gone up an incredible \$80, placing a heavy burden on our seniors. Battleford's residents will now pay \$225 for a basic call; far more than the \$135 charged in Regina or \$175 in Saskatoon.

Battleford's residents are asking why there aren't standard rates across the province and why we are being discriminated against.

Despite large increases in funding for health from the federal government, the provincial budget this year contained no help to communities like North Battleford with ambulance costs.

With no help from the province, the district felt it had no choice but to increase rates so as to maintain valuable emergency service and replace aging equipment and increase the salaries of our EMTs (emergency medical technician).

We now hear reports that the problem may be spreading across the province. The president of the ambulance association is warning that this government's inaction is endangering ambulance service across the province, and increases across the province may be necessary.

I urge the NDP (New Democratic Party) government to avoid repeating recent mistakes in health care by making emergency medical health workers and ambulance equipment a priority.

SUMA Likes Infrastructure Portion of Budget

Mr. Jess: — Mr. Minister, the monthly newsletter of SUMA (Saskatchewan Urban Municipalities Association), *The Urban Voice*, has an interesting front page article on our budget — on our good news budget, which the members opposite have no stomach to discuss. The article is on infrastructure funding in the budget, a topic obviously of specific interest to municipalities, and it's worth quoting.

The title of this article is "Infrastructure funding: important step forward." It begins by outlining the \$10 million for infrastructure and then says, quote, "We appreciate the support given by the province in the midst of many other competing needs."

The article goes on to point out that this money comes without federal government participation, and says, "We particularly want to commend the province for being willing to take this positive step despite the absence of a national commitment."

The article expresses hope that our provincial support will trigger another commitment from the federal government to join a three-government effort like the one which existed between '94 and '98. Mr. Speaker, we realize that municipalities are working hard to satisfy competing interests. I was pleased to read then that they recognize and appreciate our efforts for them in the face of the same kinds of demands. Thank you, Mr. Speaker.

Congratulations to Mallard Industries

Ms. Draude: — Thank you, Mr. Speaker. Recycling is an integral part of waste reduction in many communities within my constituency. Today it gives me great pleasure to bring to your attention a non-profit organization, Mallard Diversified of Wadena which was recently awarded the 1998 Saskatchewan Waste Minimization Award for non-profit organizations. Mallard Diversified programs involves 34 disabled employees and has been operating for 25 years in Wadena.

In 1998, Mallard shoe repair division repaired 750 pairs of shoes; the oil ecocentre collected 9,000 litres of oil. They collected and recycled 4,000 pounds of household plastic, 17,040 pounds of household glass, 16,500 pounds of clothing, 6,000 tonnes of newsprint, 552 tonnes of cardboard, 24 tonnes of mixed waste, and 24 tonnes of magazines. Mallard recycled and diverted 1,369,062 containers and 2,008 . . . 208,226 pounds of material from the landfill. The efforts of this organization not only benefited the community in reducing waste at the landfill, but they provided employment.

Mr. Speaker, I would ask the House to join with me in congratulating the staff, the board, and the employees of Mallard diversification in their contribution to the reduction of waste in their community.

Some Hon. Members: Hear, hear!

Successful Year for Weyburn Co-op

Hon. Ms. Bradley: — Thank you, Mr. Speaker. Mr. Speaker, I've spoken before about the spirit of co-operation the people of Saskatchewan exemplify. Today I will present another example of the important role co-operatives play in my constituency of Weyburn-Big Muddy.

The Weyburn Co-op has just had a very good year. As a matter of fact, 1998 was their second best year on record. Sales at the Weyburn Co-op were \$20.4 million.

Veteran allocations were just about three times higher than the last year. Over \$700,000 were handed back to members. Five per cent for gas was paid out, which amounts to about two and three-quarter cents per litre at the pumps, and 4 per cent for food. This equates to two weeks of free groceries. This shows the strength of Weyburn Co-op.

Congratulations to the Weyburn Co-op board, general manager Don Kraft and his staff, and the Weyburn Co-op membership for a successful year. By working together, everyone benefits — good service, good returns, good patronage.

Yes, Mr. Speaker, co-ops are alive and doing very well. Congratulations to the Weyburn Co-op.

Some Hon. Members: Hear, hear!

Parkland Region Science Fair Award Winners

Hon. Mr. Serby: — Thank you very much, Mr. Speaker. It's my pleasure to announce that I attended the Parkland Region Science Fair Awards in my home constituency of Yorkton this past weekend. It's one of 11 regional fairs that go on across the province, of which the Department of Education participates to the tune of about 50,000 and SaskEnergy for another 25,000.

And kids from all over the Parkland area came together to have their science project judged in a variety of different categories. And I have to say I am continually amazed by the creativity, the depth of knowledge that our young minds display in competitive events such as this. And I always come away knowing a little more than I did when I arrived.

And I would like to recognize the top three winners in the House this afternoon, Mr. Speaker. The third place overall winner was won by Robbie Wonder from Foam Lake. The second place winner was presented to Terri Poulson of Foam Lake. And the special achievement award for the first-place winner was presented to Ambrely Faye, also of Foam Lake.

I am also proud to say these winners will be representing the Parkland area this spring and be attending the Canada-wide science fair in Edmonton. And I would like to congratulate Robbie and Terri and Ambrely on their regional awards and wish them the very best of luck at the Canadian finals and continued good work by the teachers from Foam Lake. Thank you very much, Mr. Speaker.

Some Hon. Members: Hear, hear!

Star Café in Marcelin Celebrates 75 Years

Mr. Renaud: — Thank you, Mr. Speaker. The member of Redberry lost the toss and I, a former resident of Marcelin and the MLA for Carrot River Valley, take great pleasure in congratulating the Star Café on 75 years in business.

The café was established in the early 1920s by W. G. and Jennie Howe, with the help of their son, Dave, and Uncle Mah. In those days a whole meal could be purchased at the café for 35 cents; that included soup, dinner, dessert, coffee.

The café also looked after the small appliances and accounting needs of people in the community.

The café still provides fast, delicious meals and appliance repairs, golf clubs, TVs, stereos — you name it, Dave has it — to Marcelin residents and surrounding area.

The Star Café is a great example of the contribution Chinese Canadians have made to the economic and social structures of our rural towns. The small-town café is as much a signpost of rural Saskatchewan as the Wheat Pool elevator and the Co-op store.

Dave Howe is now the sole owner of the café and he remains active in the community. Dave sponsors an annual tennis clinic for the local schools, has held the Dave Howe golf tournament for the past 25 years.

He has emceed every event ever held in Marcelin. And Dave is also a recipient of the Saskatchewan Order of Merit.

I'd like to personally thank all of the people at the Star Café for their hard work and all of the patrons that make a daily visit as a part of their routine.

Congratulations on 75 years of successful business. I know they remain proud to provide such an essential service to the constituents of Marcelin. Many past and present members have visited the Star Café and I . . .

The Speaker: — Order. The hon. member's time has expired.

Some Hon. Members: Hear, hear!

ORAL QUESTIONS

Member from Cypress Hills

Ms. Julé: — Thank you, Mr. Speaker. Mr. Speaker, my question is for the Premier.

Mr. Premier, yesterday a member of this Assembly was found guilty of an extremely serious crime, the crime of child sexual abuse.

The child sex trade is unacceptable, Mr. Premier, and it must be stopped. As elected officials we must send the message of zero tolerance loud and clear. The very first Bill introduced by the Saskatchewan Party in this session was an Act to protect children involved in prostitution. The very first Bill introduced by the government of the day in this session deals with the same issue.

Mr. Premier, the Saskatchewan Party has called on the member for Cypress Hills to take the appropriate step and resign. That has not happened at this time. Will your government introduce a motion calling for his removal from this House?

Hon. Ms. MacKinnon: — Thank you, Mr. Speaker. As the member opposite will know, we have been in discussion with the opposition parties and with the independent member, and the government will be proposing a motion before orders of the day to deal with this matter.

Funding for Education

Mr. Krawetz: — Thank you very much, Mr. Speaker. Mr. Speaker, my question is for the Minister of Education. Mr. Minister, school division boards across Saskatchewan are finalizing their budgets and the news isn't good for taxpayers. Eight years of NDP government has buried Saskatchewan families with a mountain of taxes. And while the NDP lines the government bank account with \$1 billion in new taxes, funding to school divisions has been cut to the core.

Now school boards across the province are being forced to increase property taxes just to maintain basic services. Mr. Minister, last week the public and separate school boards in the city of Saskatoon increased property taxes by almost 7 per cent, and they are blaming the tax increase on your NDP government.

Mr. Minister, taxpayers can't take another hit. Does the government have a long-term plan for reducing the mountain of NDP taxes, or are you just going to keep gouging taxpayers until they finally flee the province?

Some Hon. Members: Hear, hear!

Hon. Mr. Serby: — Well, Mr. Speaker, first of all I want to say to the member opposite that he should examine first of all what happened through the course of the '80s in this province of which his party was in government. And during that period of time we saw the foundation grant and the contribution to education go, in this province, from 55 per cent to 45 per cent over a period of 10 years. That's the record of the Tory Conservative Party over that period of time, which this member now represents.

Over that period of time, Mr. Speaker, what this government has done since we've been in power is that we've taken the foundation operating grant in this province and we've increased it. And this year when you take a look at the foundation operating grant in this province, Mr. Speaker, you'll see that it's just over \$400 million. This is the largest investment that we have seen in the foundation operating grant in the history of this province, Mr. Speaker. And I am proud of that because this government and this administration cites education as one of its primary objectives to increase and grow in this province, and it will continue to be that into the future, Mr. Speaker.

Some Hon. Members: Hear, hear!

Mr. Krawetz: — Thank you very much, Mr. Speaker. You know, I know the minister has not been in charge of the K-to-12 systems for very long, but the minister has to bring himself up to speed very quickly.

The changes to the property tax, Mr. Minister, have resulted in the fact that this government only supplies 39 per cent on the average of the cost of education. At the same time, Mr. Minister, since 1991-92, when the grant given by the government was about \$470 million, you have never matched that amount in the entire eight years. You are below what you gave the boards of education in 1991-92, Mr. Minister. You have . . . you have taken about \$450 million from boards of education. That's fact, Mr. Minister.

You know, Mr. Minister, I guess you know when you look at the fact that you've got a billion dollars in new taxes and a billion dollars in new utility rates, it's no wonder that school divisions across the province are being forced to increase property taxes.

Mr. Minister, does the NDP have a plan for relieving the tax burden for property owners? What action is the NDP taking to stop the tax increases from chasing people and businesses out of Saskatchewan?

Hon. Mr. Serby: — If the member opposite would just examine the growth in this province over the period of time that we were in administration and over the time that his party was in administration, you will see that today we have 300,000 more people living in this province and more children going to school than during the time that the member opposite's party was in government. So we just have to examine the record.

Some Hon. Members: Hear, hear!

Hon. Mr. Serby: — But I want to say to the member opposite that when you take a look at what we're doing in education on this side of the House and what the opposition parties suggest they're going to do — over the last two years we've increased the base in operating grants by ten and a half per cent over the period of two years; when you look at what the member and his party are speaking about, it's 1 per cent which is the cost of inflation on an annual basis, which is less than one-third of what the education requirements in this province are.

Now what the member opposite should be doing is he should be reading his party's agenda — his party's agenda which are to freeze education in this province, Mr. Speaker — and not his

agenda, his own personal agenda which doesn't match with what the Conservative party has to say in their mandate.

Some Hon. Members: Hear, hear!

Mr. Krawetz: — Mr. Speaker, there's a couple of things that the minister has to realize. In 1991-92 the grant to school boards totalled \$470 million. You know the decision made by school trustees at that time in '91-92 should have been to ask this government for a freeze — a 10 year freeze for the amount of money allocated to school boards. Because for every year for the last eight years they would have been significantly better than what they are today. That's reality, Mr. Speaker.

At the same time as this government has lowered the amount of money that they are offering to school divisions in capital and in operating grants — those two have diminished year after year — the amount of money that school boards have had to pay has risen by \$150 million. That's the amount of money that school taxpayers will have to pick up.

Mr. Minister, what is your plan for addressing the high tax level in this province?

Some Hon. Members: Hear, hear!

Hon. Mr. Serby: — Thank you, Mr. Speaker. It's amazing that the member opposite has forgotten his roots. Because when I said earlier, Mr. Speaker, that when you take a look at the past administration of the Tories, of which this member now supports, and I want to say to the member opposite when he examines that he will see that from 1991 . . . from 1982 to 1991, his party and the people whom he supports reduced the portion of property tax . . . or reduced the portion of the operating grant that the province provides by over 10 per cent. It went from 55 to 45 per cent. That's the record of the member opposite — not our record, Mr. Speaker.

What we've done over the last several years is we've taken the foundation operating grant, over the last couple of years we've added another ten and a half per cent per year because we believe in education in this province, Mr. Speaker, and are going to continue it for the betterment of young people in this province.

Some Hon. Members: Hear, hear!

Mr. Krawetz: — Well, Mr. Speaker, the Minister has to get in touch with some school divisions very, very quickly to recognize that the operating grant given to school divisions in many instances has declined by 175,000, 200,000, 220,000. Those are examples that the school divisions are receiving in less money — less money, Mr. Speaker.

Now you know what's going to happen? There's going to be closure of schools, Mr. Speaker. We are hearing from many communities where there will be grave discontinuance. Communities like Qu'Appelle, communities like Elfros, and Ebenezer, have all been informed that there's a potential that their schools are going to close or there is going to be a control on the number of programs.

You know, Mr. Speaker . . .

The Speaker: — Order, order. Order, order. Now there seems to be great enthusiasm for both the questions and the answers, but I will ask the co-operation from members on both sides of the House . . . Order . . . on both sides of the House to permit the questions to be heard and to permit the answers to be heard as well.

Mr. Krawetz: — Thank you very much, Mr. Speaker. Mr. Speaker, not very many days ago the Saskatchewan Teachers' Federation indicated that they are very, very fearful that there will be program cuts, there will be increased classroom size, and there will be a reduction of teachers. Mr. Minister, what is your plan to reduce the amount of taxes in this province so that we can have a quality education system continue?

Hon. Mr. Serby: — Mr. Speaker, it's interesting that the member opposite has today forgotten about his involvement in serving on the school board of which he spent a fair number of years, Mr. Speaker, in the Crystal Lake. Mr. Speaker, it's interesting that he's forgotten that history because he sits, Mr. Speaker, as the champion of school board closures, the champion of school closures, Mr. Speaker, in the area that he lives.

And he's on record, Mr. Speaker, in his own paper, *Canora Courier*, where he talks about the importance and the necessary . . . and how it's necessary to ensure that when you close schools, Mr. Speaker, in this province, that you ensure a good compliment of teachers and that you have good quality education. You're on record, the member from Canora, about this.

So I want to say to the member opposite, when you examine your record during the time that you served on the school board in the Crystal springs, now today which is the Canora School Division, you were involved in closing more schools, Mr. Member, you were involved in closing more schools than any other representative on your side of the House today. And you have the audacity to stand up here and talk about the record, Mr. Speaker.

Some Hon. Members: Hear, hear!

Property Taxes

Mr. Bjornerud: — Thank you, Mr. Speaker. Mr. Speaker, my question is for the Minister for Municipal Affairs. As if the education tax increases weren't enough, property taxpayers are also being asked to pay more municipal taxes, thanks to your NDP government. No sector has been hit harder by the NDP over the last eight years than municipalities.

Urban and rural municipalities have seen provincial grants more than cut in half since your government was elected, but the roads still had to be maintained, the water and sewer systems still have to operate, the policing and fire services still had to be provided. So the only choice municipal councils have in light of massive NDP funding cuts is once again to raise taxes.

Madam Minister, do you plan on continuing to raise property taxes and force more people out of business and out of the province? What is the NDP government doing to ease the property tax burden that is killing many communities and

driving jobs out of Saskatchewan?

Some Hon. Members: Hear, hear!

Hon. Mrs. Teichrob: — Mr. Speaker, municipalities helped greatly by co-operating and using restraint in their operations to help us, as another level of government, to get control of the finances and put this province back on a positive path. And we appreciate their contribution; we appreciate their contribution as locally elected responsible leaders, Mr. Speaker. If we had had such responsibility in elected people when the Tories were government, we wouldn't have been in that situation.

So they joined hands with us and they helped us in the fight.

Now that things have begun to improve, we have instituted the grants-in-lieu program to pay a total of \$12 million taxes on government property which goes to municipalities and school boards. We've provided \$4 million a year in assistance for the costs of RCMP (Royal Canadian Mounted Police) policing. We have this year given the \$10 million that one of our members referred to in a statement for infrastructure. We've increased revenue sharing.

So together, just like we did the tough things together, we're doing some positive things together now, Mr. Speaker.

Some Hon. Members: Hear, hear!

Mr. Bjornerud: — Madam Minister, the cities of Saskatoon and Regina were both forced to raise property taxes because of your government off-loading. Towns, villages, and rural municipalities across the province are raising taxes too because of your NDP government's mismanagement. SARM (Saskatchewan Association of Rural Municipalities) President Sinclair Harrison called your latest NDP budget a black day for Saskatchewan — a black day, Madam Minister.

The hard, cold reality is that property taxes are going up because the NDP has used municipalities as a ready source of cash. Thanks to your government, Saskatchewan people pay the second highest taxes in the country and taxes are going up once again.

Madam Minister, will you admit your NDP government has deserted municipalities and forced property taxes through the roof? And will you take immediate action to stop these tax increases?

Hon. Mr. Romanow: — Mr. Speaker, I think all the members of the House should take careful note of the direction of the Saskatchewan Party as epitomized with these last two questions. And basically it amounts to what — and I'm not very fond very often of citing editorials of the Saskatoon *StarPhoenix*, as much as they're not very fond of writing favourable editorials about this government — but in analyzing the platform of the Saskatchewan Party, or what we know them to be — the real Tory Party — this is what the Saskatoon *StarPhoenix* said, quote:

What's most striking about the party's platform is that apart from the tax cuts it has eschewed all other spending priorities in favour of highways. While a good case can be

made for fixing up a deteriorating highway system (here's the key words, Mr. Speaker), it appears that a Hermanson government would for four years do nothing to address other pressing issues (do nothing to address other pressing issues).

And, Mr. Speaker, to wrap up, and, Mr. Speaker, to wrap up, that's exactly their position. They want to lower taxes and lower revenues while spending more, so they say. But their platform says it won't do it at all.

Mr. Speaker, it didn't work in the 1980s and it just doesn't add up in the 1990s either.

Some Hon. Members: Hear, hear!

Court Injunction by the Saskatchewan Association of Health Organizations

Mr. Osika: — Thank you, Mr. Speaker. My question this afternoon is for the Premier. The injunction that's in place is like a cocked gun still pointed at the head of nurses. The injunction is just your club to ensure nurses sign the agreement, isn't it, Mr. Premier? Your precious election is more important than bargaining in good faith and keeping nurses in Saskatchewan. Admit it.

Mr. Premier . . . Mr. Speaker, to the Premier, you have an opportunity to continue to bargain in good faith. Will you remove the injunction so nurses don't have to feel you breathing down their neck unless they ratify the agreement?

Hon. Mr. Romanow: — Mr. Speaker, the hon. Leader of the Third Party understands — most surely if he doesn't, his seatmate does — that the application for the injunction was made and is made and is in the property now of the courts, but was made by SAHO, the Saskatchewan Association of Health Organizations.

The Government of Saskatchewan is not a party to the injunction. The best is that Justice lawyers are there holding a watching brief. This is a matter of which the court has now seized the jurisdiction, and in the light of that, I think it would behoove us all to allow the judicial system to proceed in its normal and usual fashion.

Some Hon. Members: Hear, hear!

Mr. Osika: — Mr. Speaker, up to this point in time, while the Premier feels he has won, the truth is he's lost. The whole province has lost, and what's worse is that the confidence of the nurses has been lost. They have no confidence in their future in Saskatchewan. The Premier's take-it-or-leave-it bargaining style has damaged the nursing profession in this province for years to come, in those coming years when I may need some help from those great people.

Don't believe me? Well put down your polling sheets, Mr. Premier, and talk to some of the nurses. The Premier's threats forced the nurses to accept the settlement.

Mr. Premier, you've done enough damage to nurses already. Mr. Speaker, I ask the Premier to do the right thing now and ask

the court injunction to be withdrawn.

Hon. Mr. Romanow: — Mr. Speaker, I don't really quite care how the Liberal Party characterizes what my role and the government's role was. The facts are clear. I endeavoured for 11 hours, off and on, to meet with both sides to make sure that we could come to a settlement, which did not work out.

Then on Saturday night before the settlement on Sunday morning, essentially an arrived arrangement and agreement was made between SAHO (Saskatchewan Association of Health Organizations) and the nurses' union. That's where the matter stands.

That is I think an honourable agreement and I think it has the basis of building from there, recognizing nurses' grievances, and continuing to build the best health care system that we have.

But there's one big difference between us and the Liberal Party. So long as I have anything to say about the public policy of this government, I will never, ever argue that the laws of this legislature, even if I don't like them, should be disobeyed. Nor will I ever countenance anybody to disobey an injunction, an injunction issued by a court, as your Liberal leader did.

Imagine the folly of that. The Liberal leader says, elect me as Premier; I'll pass a law; if you don't like it in your mind, you don't have to follow it.

Is that your view of democracy?

Some Hon. Members: Hear, hear!

Mr. Osika: — Mr. Speaker, the Premier's holier-than-thou attitude is quickly forgotten in his past actions when he tore up the GRIP (gross revenue insurance program) contract for farmers; when he refused to listen to the mediators in the judges' issues with this Premier, with this province.

Mr. Speaker, the talk among nurses now is not about all the nurses who will be coming to Saskatchewan. It is about nurses who are leaving, the younger nurses who are going to other places because the government does not want them here.

Mr. Premier, your NDP health plan has done everything it can to either cut nurses' jobs, encourage nursing shortages, or force nurses out on the picket line. Your plan does nothing to convince nurses to stay in Saskatchewan. Those who do stay will look for casual work as a way to escape the working conditions your policies have forced on these nurses.

Can you explain why you have done everything you can to drive out of the province, nurses, and nothing to convince them to stay. Is this a personal vendetta against nurses who dared defy you, or do you feel overworking and underpaying nurses is the only option to keep your health care system afloat?

Hon. Mr. Romanow: — Mr. Speaker, the hon. member's question and premises are, to be blunt about it, in one word: incredible — incredible.

In Alberta, the nurses are negotiating now with the Alberta

health authorities and the Alberta government. In a statement of today's date, April 20, 1999, under the headline, "Nurses pessimistic about contract talks" here's what the Alberta nurses' negotiating president says about our arrangement in Saskatchewan. Quote:

"In Saskatchewan not only were wages addressed, there's agreement on recruitment and retention as well as on enhancing benefits," Smith said. "It was not a single faceted package that had to be in place to resolve it. That's the same as what we said here. It's not a single issue."

In order words, she is lauding the agreement that the nurses and SAHO arrived at. That's what the Alberta nurses' president is doing.

And moreover, I'd like to know from that hon. member, knowing exactly where that hon. member's background has been, and an honourable one it has been, do you condone your leader's call publicly that the laws of this legislature and the injunction rules of courts should be defied? Yes or no?

Some Hon. Members: Hear, hear!

The Speaker: — Order.

Mr. Osika: — Mr. Speaker, we wouldn't be having this debate if it wasn't for that Premier and that government creating the mess and destroying the health care system in . . .

The Speaker: — Order, order, order. Order! The Chair is having great difficulty being able to hear the question being put and I ask for co-operation of members of the House . . . Order. Order.

Mr. Osika: — Thank you, Mr. Speaker. As I mentioned initially, we would not even be having this debate had it not been for that Premier and that NDP government's mismanagement and mishandling of our entire health care system and bringing this province to the brink of a disastrous health care program.

The Premier should be listening to what the nurses here in this province are saying, not reading the Alberta newspapers. If he's heard the voices of the young nurses here, Mr. Speaker, then he would hear from nurses like Sally Burnett, who after graduating in this great province with a nursing degree, who after looking for full-time work in Saskatchewan answered an ad for full-time work in Montana. Are you proud of that?

Ms. Burnett now works full time in Wolf Point, Montana. They pay for continuing education expenses. They pay her even while on education leave, and best of all, Mr. Speaker, overtime is optional and guilt-free. Like Sally, young nurses can leave the province for more money and less grief. Mr. Speaker, what does the Premier say to those young nurses like Sally. What can he can say to the young nurses who can pick up and leave Saskatchewan for more money and less stress?

Hon. Mr. Romanow: — Mr. Speaker, what I say to this particular young nurse is what I say to every nurse and every Saskatchewan people. This province is a wonderful place of employment opportunity, whether it's in health care or a whole

variety of other areas.

During the strike, I'm advised, during the strike Regina District Health Board hired a nurse a day, hired a nurse a day during the strike. And I can tell the nurses of Saskatchewan that as difficult as it was for them and for all of us and the people of Saskatchewan, the president of the Alberta union of nurses said what I just quoted to you a few seconds ago.

Now in all of your attempt to be holier-than-thou in health, you've refused to answer whether or not it is the official position of the Liberal . . . the Liberal Party position, as it must be, that they would defy the law and defy the injunction.

I'll ask you another question since you refuse to ask those two. Would you have committed 22 per cent increase for nurses? And if so, where would you have gotten the money?

Some Hon. Members: Hear, hear!

Closure of Royal Canadian Mounted Police Detachments

Ms. Julé: — My question is for the Minister of Justice. Mr. Minister, yesterday in question period you said the communities of Consul, Eastend, and Climax were told the RCMP (Royal Canadian Mounted Police) was not leaving the area. Mr. Minister, the concern is not that RCMP will leave the area. People in those communities along with the town of Val Marie are concerned they will not have RCMP living in their communities. They are concerned the small detachments established in those towns will be closed. They are worried that their communities will be policed from Swift Current, Maple Creek, and Shaunavon.

Can you give the people of those four communities the assurance, Mr. Minister, that RCMP officers will continue to live and work in their existing community detachments?

Hon. Mr. Nilson: — Thank you, Mr. Speaker. In this province we have a police force that we engage, the RCMP, on a contract basis. And they provide policing throughout the province. And this started out as many of us know this year, with the Great March West, and we'll be celebrating that.

Over the years many things have changed and transformed. But what I do know about this particular question in this particular area is that the people down in that community need to work together with the RCMP to decide what are the policing services that they need in those communities. It's my understanding that the policing service as it is now is going to continue. But that doesn't mean that it will be there forever in the same way because, as we know, the province changes and different things happen.

And so practically, practically what we're doing in this particular area is working with those communities through the RCMP, and the continued discussion takes place. But as I said yesterday there's no plan to leave those particular communities at all.

Some Hon. Members: Hear, hear!

Hon. Ms. MacKinnon: — Mr. Speaker, I request leave to

introduce a motion with respect to the member from Cypress Hills.

Leave granted.

MOTIONS

Suspension of Member

Hon. Ms. MacKinnon: — Thank you, Mr. Speaker. Mr. Speaker, I move, seconded by the member from Humboldt:

That given that Jacob F. Goohsen, the member for Cypress Hills, was convicted on Monday, April 19, 1999 of an offence under section 212(4) of the Criminal Code of Canada, and that section 40.2 of The Legislative Assembly and Executive Council Act states that: "Nothing in this Act shall be construed as affecting the right of the Legislature to expel or suspend a member according to the practice of Parliament or otherwise";

That pursuant to section 40.2 of the Legislative Assembly and Executive Council Act effective immediately the member for Cypress Hills is suspended from sitting and voting as a member of this legislature, and is ineligible for the pay or benefit or any allowance, grant, indemnity, disbursement, reimbursement, or salary provided pursuant to that Act and be it further resolved that the suspension shall continue until all available appeal rights are exhausted or expire; and should the conviction be upheld the member for Cypress Hills is expelled and his seat shall be vacant.

I so move, and I request leave of the Assembly for a two minute recess before voting occurs on this motion.

Leave granted.

The Assembly recessed for a period of time.

The Speaker: — Order. Is the Assembly ready for the question?

Hon. Ms. MacKinnon: — Yes, Mr. Speaker, after consulting with members of the Assembly I think we all believe that we should give the member for Cypress Hills 24 hours to appear and make whatever statement he may wish to make.

So after consultation, it is our view that the vote would be more appropriately held tomorrow. So I close the debate.

Mr. D'Autremont: — Thank you, Mr. Speaker. Members of the Assembly, we agree with the 24-hour suspension.

We believe that it would give the member from Cypress Hills the opportunity to come to this House and do the appropriate action of resigning. We believe he deserves that opportunity.

And therefore I would move adjournment of debate.

Debate adjourned.

(1430)

ORDERS OF THE DAY**WRITTEN QUESTIONS**

Mr. Kowalsky: — I am pleased to give you the answer to that question, Mr. Speaker.

The Speaker: — The answer to item no. 1, question 57 is tabled.

Mr. Kowalsky: — Convert question no. 58.

The Speaker: — Item no. 2, question 58 is converted to notice of motions for returns (debatable).

Mr. Kowalsky: — From an open and accessible government, Mr. Speaker, question no. 59.

The Speaker: — The answer to item no. 3, question 59 is tabled.

PRIVATE MEMBERS' MOTIONS**Motion No. 2 — Negotiations with Nurses**

Mr. D'Autremont: — Thank you, Mr. Speaker. Mr. Speaker, this has been a tough two weeks in health care. It's been tough on everyone in this province particularly, Mr. Speaker, on nurses and on patients that were residents in the hospitals during the nurses' strike.

This motion, Mr. Speaker, condemns the NDP government, particularly the Premier, the member from Riversdale, for his arrogant style of negotiations and the arrogant style in which he dealt with nurses. And in particular, Mr. Speaker, the arrogant way in which he spent taxpayers' money to vilify nurses in this province. Vilify the nurses of this province, Mr. Speaker, because they would not agree with his style of negotiations. And we believe that is not the role, not the honourable role for the Premier of this province, Mr. Speaker, to be vilifying the people on the tax rolls, the people who we are calling to look after our ill and injured in our hospitals, Mr. Speaker.

Mr. Speaker, nurses in this province . . . nursing in this province is an honourable profession. And the way that the Premier was treating them, Mr. Speaker, dishonoured this House and the role of nursing in attempting to picture them solely as greedy, wanting 22 per cent. Because that is exactly what the Premier was doing.

Here he stood in the House today, Mr. Speaker, and read out a quote from Alberta saying that in Saskatchewan the settlement wasn't just about salaries. It was about working conditions. It was about overtime. It was about nurses having enough people on the wards to service the ill and the injured.

And yet in the advertising and in his speeches inside and outside of this House during the strike, Mr. Speaker, the Premier's only contention was that it was 22 per cent. Over and over again, 22 per cent, 22 per cent — how can we afford 22 percent? And yet he stood in his place today and said oh no, it wasn't just about salaries. There were other things there.

Well, Mr. Speaker, those were certainly not a part of the advertising campaign that the Premier, and the Minister of Health, and the member from Lloydminster ran against the nurses in this province. They spent the nurses' money in this province to attack the very nurses that today the Premier was standing up and talking about as not wanting just salaries, but other things as well. It was simply unfair, just as this government has been unfair to all sectors of society, Mr. Speaker.

In question period my colleague spoke about how unfair the Department of Education was being to the taxpayers of this province, the property taxpayers, by downloading onto them. That has been a hallmark of this government. To initiate negotiations, initiate contracts, to sign contracts, and then turn around and break them. And, Mr. Speaker, in this nurses' strike I fear that is exactly what's going to happen.

They signed a memorandum of understanding and put in place some binding arbitration to deal with some of the issues. Well we saw binding arbitration earlier, Mr. Speaker, when it came to judges. We even had a Bill presented to this House by the minister of Labour that said, we will honour the binding arbitration between the Government of Saskatchewan and the Provincial Court judges.

And when that agreement came back, what happened? The government simply broke the legislation, refused to accept the arbitration report, and came back into this House and changed the rules and deemed it to have happened before the negotiations took place — deemed it to have happened — which is basically what the government was doing with their back-to-work legislation. They didn't deem it in that particular case, but they said, you will accept our outline of what health care remuneration should be — 2, 2, 2, and 1, and that's it.

Well, Mr. Speaker, the nurses of this province were not prepared to accept that. And that's why they were out on an illegal strike for nine days and 18 hours, since they did have actually about six hours of legal strike in there before this legislature, by a unanimous vote of the government side with a unanimous opposition from the opposition side, and passed back-to-work legislation, Mr. Speaker. And it was a sad day in this province when that legislation passed.

And I think that the members that voted in favour of that back-to-work legislation, Mr. Speaker, are going to pay a penalty for that. They're going to pay a penalty for that at the polls in the upcoming election.

Now the Premier has talked quite often, Mr. Speaker, about how four years is the proper mandate time and that he would return to the polls every four years. Well, Mr. Speaker, four years is up in June. And it will be a good measure of the courage and the willingness to follow his word of this Premier if we actually get an election this June.

I'm looking for an election this June, Mr. Speaker. I'm looking forward to it. And when this House wraps up at the end of this session, Mr. Speaker, I look forward to bidding a fond farewell to a good number of the members opposite. I will wish them well in their life, but I don't expect to see them back in this House.

And I will not be standing in this spot, Mr. Speaker, after the election. I will be standing on that side looking this way. And there will be considerably fewer members on this side of the House, Mr. Speaker.

And the member from Carrot River chuckles and laughs back here. He knows, Mr. Speaker, he knows that he will not be returning to this House after the next election. Even the member from Regina Albert South — even the member from Regina Albert South — he will not get his sophomore spurs in this Assembly, Mr. Speaker. He will be simply a one-term member.

Mr. Speaker, the nurses' strike in this province is going to have a telling effect on a good many people. Last night over at CBC (Canadian Broadcasting Corporation) Radio, they had a panel, Mr. Speaker, to talk about health in general, but in particular everyone wanted to talk about the nurses' strike. And it was very interesting what some of the comments were that came out of that, Mr. Speaker.

One of the panel members that was on there was a fellow by the name of Steven Lewis, and he was the CEO (chief executive officer) of Health Services. And his comment, Mr. Speaker, in describing Saskatchewan's health care system was that our health care is a third-rate desert. Not even a first-class desert — a third-rate desert, Mr. Speaker. And yet Mr. Alan Backman, who is the government's representative on the SAHO board — so he's a government appointee, Mr. Speaker, on the SAHO board — he went on to say that people from around the world were coming to Saskatchewan to learn and study and take home with them the Saskatchewan model of health.

Well, Mr. Speaker, I don't know what the government opposite is selling to these people if they are indeed coming to visit Saskatchewan because we have the longest waiting lists in Canada for surgeries; we've just gone through a nurses' strike because conditions are so terrible in our health care facilities. Why would anyone want to copy Saskatchewan?

By assuming that there is a Saskatchewan model, Mr. Speaker, is that to say that there's also a Manitoba model of health care? Is there an Alberta model of health care? Is there a BC (British Columbia) model or an Ontario model? I thought we were all under medicare, Mr. Speaker, that we all had to adhere to the five principles of medicare.

Now I recognize that in Saskatchewan adherence to the five principles of medicare is kind of a flexible thing, particularly for the government opposite where access . . . Access, Mr. Speaker, is a great problem in Saskatchewan. Just ask the people that leave this province to gain access to health care, to get an MRI (magnetic resonance imaging) or to get a CT (computerized tomography) scan or to get cataract surgery or any of the other surgeries that people need and can't get in Saskatchewan, Mr. Speaker, because it's simply not available in a proper time frame in Saskatchewan.

Last night at the CBC forum, there was a doctor there who spoke about 21 days for cancer surgery. And he went on to describe a number of cancer surgeries that if you don't get the surgery within 2 days there isn't any point in having it, and yet in Saskatchewan people are waiting on average 21 days for surgery. And he described a number of types of surgeries —

that he has talked and met with people here in Saskatchewan that have to have surgeries on a very immediate basis and can't get it.

He was taking to some colleagues from California and asking them how long would it take from the time someone walked into their office with a particular kind of cancer to the surgery? Two days. What's the outside limit — what's the longest anybody would have to wait? Three days. And yet the government members opposite vilify the American health care system, and yet you get your surgeries in two or three days.

In Saskatchewan you wait 21 days for cancer surgery. But we have the best health care system in the world according to the members opposite — the best.

When you wait 7 . . . no, 1400 times longer, almost, than you do in California for surgery . . . (inaudible interjection) . . . Maybe my math isn't quite up to what it should be. Well let's say ten and a half times — ten and a half — ten and a half times longer . . .

An Hon. Member: — Arithmetic never was a Tory strong point.

Mr. D'Autremont: — Yes, that's why I have to help my son do his math — I learn it.

Mr. Speaker, we have seen a number of other examples like that. We have one MRI operating in Saskatchewan, Mr. Speaker, one MRI. Our neighbours across the border in North Dakota have 12 for 660,000 people. We have one for a million people. And yet according to our members opposite, according to the members opposite, we have the best health care system in the world — the best health care system in the world.

And aren't they proud of it? They're proud of the fact that it's going to take you nine months to get an MRI — they're proud of that. When we can phone up Williston and we can be in there tomorrow, Mr. Speaker, we can be in there tomorrow. But not in Saskatchewan.

Larry Navin . . . (inaudible interjection) . . . Oh the member from Lloydminster wants to enter debate. She says because there's so many millions of people that aren't covered. Well, Madam Member, Mr. Speaker, go down there and talk to the people. I've talked to the members in the House from Williston. And there isn't a single person in Williston that doesn't have access to health care. Not one. Not one, Mr. Speaker — not one.

The members opposite say that in Alberta there are so many hundred thousands of people that haven't paid their health care premiums. And they're probably right. But not one of those people, not one of them, is denied health care — not one is denied health care.

That's the truth, Mr. Speaker. Because they have access. And they have access a lot better in Conservative Alberta than they do in socialist NDP Saskatchewan. And that's the facts.

They brag about, oh well we're going to have three MRIs. Yes, we are at some point in time . . .

(1445)

An Hon. Member: — September.

Mr. D'Autremont: — September. Well it was promised for December last year and now she says September. The NDP have a very flexible timeline when it actually comes to the truth, Mr. Speaker. It moves continuously.

So, Mr. Speaker, I think the members opposite should be admitting that their health care is a disaster; that the Premier's intervention in the health care system, in the strike, was a disaster. The fact that this government has refused to recognize their role and their responsibility in the health care system is what has led to this disaster.

The government members opposite last year elected the president of SUN (Saskatchewan Union of Nurses) to be one of their colleagues — sits in the cabinet, sits in the cabinet as the Associate Minister of Health. And I know that the member from Lloydminster was jealous of the fact that that member from Saskatoon Eastview became a cabinet minister and she didn't, because she obviously wants to get up and participate in the health debate. And she'd like to be able to do that as a cabinet minister but I'm afraid, Mr. Speaker, it's not to be, it's not to be.

So, Mr. Speaker, the member, the past president of SUN, was elected as a member of the NDP government, as a cabinet minister, and yet she stood in this House, Mr. Speaker, and voted against her union. She voted to put her union back to work, to force a settlement on her past colleagues. And we heard the response, Mr. Speaker, when she did that. We heard the galleries booing that member. Doesn't happen very often, Mr. Speaker, in this House but they booed the member from Saskatoon Eastview.

And I believe, Mr. Speaker, that they indeed have that right to do so. While it may not be proper decorum in the House for members in the galleries, people in the galleries, to participate in the debate, it certainly did give an indication of how strongly the nurses were feeling about that issue. Mr. Speaker, I believe it would have been incumbent on the government members opposite to have allowed their members to vote freely — to vote their consciences.

The member from Regina Albert South says they did. They did have the right to vote freely. And I'm sure that the nurses will be pleased to hear that, that the member from Saskatoon Eastview was free to vote however she wanted — however she wanted — and she chose to vote for back-to-work legislation for her union. I'm sure the nurses are going to be very pleased to hear that, Mr. Speaker.

The other part, Mr. Speaker, and I mentioned it earlier, was the ad campaign in the newspapers and on the radio that this government ran against the nurses. I believe that only inflamed the issue. It certainly didn't have anything to do with negotiations with the nurses because they weren't impressed with it at all. It didn't have anything to do with SAHO because they were already in place to be at the negotiating table. They had their marching orders from the government.

Mr. Speaker, it was simply crass politics. It was only for politics that the government was spending the taxpayers' money to vilify nurses in public. It was nothing but pure crass politics, Mr. Speaker, and should be condemned.

And that's what this particular motion does, Mr. Speaker. It condemns the government for those crass political actions. Therefore, Mr. Speaker, I would move, seconded by the member from Moosomin:

That this Assembly condemns the NDP government, and in particular the Premier, for their arrogant handling of the strike by Saskatchewan Union of Nurses and for their expensive propaganda war which only served to make the situation worse.

I so move.

Some Hon. Members: Hear, hear!

Mr. Toth: — Thank you, Mr. Speaker. Mr. Speaker, I'm pleased to be able to stand in the Assembly this afternoon and speak to the motion that's before the Assembly in regards to health care in this province and the deplorable state that we find our health care system in today.

Mr. Speaker, let me begin by just reading a bit out of one of the letters, many letters that I received, and I know my colleagues received letters, not only from nurses and nursing unions but certainly from individuals across this province over the past number of days in regards to the specific situation that we have found ourselves in in the health care field. And I quote from a letter:

We are aghast and appalled that the NDP government, the founders of Medicare and protectors of workers' rights would be so callous as to violate those very principles. By taking away our rights to collective bargaining and refusing to address our health care issues, safe patient care is jeopardized.

Laws for collective bargaining were in place long before Roy Romanow came to office. Suddenly the law is adapted for . . .

The Speaker: — Order. Now I listened to the reference the hon. member made from which he was quoting, and I don't recall hearing it being a published reference, and remind him that in using proper names here we do make an exception when it's a published reference that one is referring to. Otherwise hon. members are required to refer to members by their roles in the Assembly.

Mr. Toth: — Mr. Speaker, I'm not sure. This may be on all members' desks; I'm quite sure it is. But for the sake of the Assembly, I'll put the Premier in the place of the name of the member in this letter.

(The Premier) . . . has referred to the nurses' strike as a "runaway train". Let us say that the "runaway train" started with health care reform, which when translated, meant the closure of small hospitals, staff cuts, and bed closures.

Mr. Speaker, as I read this letter and many of the other letters that I've received on my desk — and there's no doubt in my mind that not only members of our caucus, the Saskatchewan Party caucus and the official opposition have received these letters; no doubt many of the members, government members including the Health minister and the Premier have been receiving the same letters.

And, Mr. Speaker, it would seem to me that if the government, if the Premier of this province, is indeed listening, the Premier will start to listen very carefully. Because while we can argue the whole debate about health care and about workers, and in this case before us, specifically the nurses, that they've taken an oath. And I've heard many people talk about the fact that nurses take an oath to their patients.

The members of this Assembly take an oath to represent their constituents, to speak out on the issues, to represent the issues and the concerns of their constituents. And certainly as we've been into the debate of health care in the province of Saskatchewan over the past number of years, and most recently, the strike by the nurses in the province of . . . in this province, we have an oath as well to represent the issues and the facts.

Mr. Speaker, I can assure that this whole debate of health care, even in the constituency that I represent, that many people in my constituency, in the Moosomin riding, certainly recognize the contribution that nurses make to the health care, the role of health care in delivering the health care services in this province, in our communities, as well as to the economic viability, if you will, of our community and many small businesses and farms as well. Having been . . . or being married or being a spouse of a member who may have a business.

And, Mr. Speaker, I think what the debate before us says and says very loudly and very clearly that many people across this province are beginning to really question the commitment the NDP Party has, and the Premier and this government have, to real health care in the province of Saskatchewan.

Mr. Speaker, when we look at health care, I don't doubt that as we look at the 52 hospitals closures that have taken place since 1991 — 52 . . . or 53 actually with the Plains hospital, 53 hospital closures, the reduction of nurses and other support staff in the province of Saskatchewan and in the delivery of health care, one has to ask — and as I get it every day — people are asking, well, if we cut 52 facilities out of the picture, we've reduced the workforce as a result of the reduction. The individuals, the nurses in those facilities weren't moved to other facilities.

Actually many jobs were cut from the system. And then the government and the Minister of Health stands up in this Assembly and tells us we are putting more today into health care than we have in the past.

Mr. Speaker, as the Minister of Finance indicated, over \$1.9 billion now going into health care delivery, funds for health care delivery services in the province of Saskatchewan, one has to ask where is the money going?

We have patients on waiting lists, and the member from Regina South knows what the waiting lists are in the province of

Saskatchewan.

We have in a couple situations, Mr. Speaker, we have instances where individuals are prepared to donate organs to help another member, whether it's a family member, and this is a very serious situation. And they're on waiting lists, Mr. Speaker. Situations where their lives are threatened and they're on waiting lists. We have people waiting for cancer treatments in the province of Saskatchewan.

And I'm sure the Premier and, as we've heard, the Minister of Health would argue today that they're on waiting lists because the nurses went on strike and the nurses weren't doing their job.

And as my colleague, the member from Cannington mentioned, what we have seen is an attempt by this Premier and by this government to vilify the nurses rather than sitting down and coming to a reasonable collective agreement, using the collective agreement process that this letter talks about and indeed entering into meaningful negotiations to address the concerns of health care workers across this province.

Mr. Speaker, as I've indicated over the past few weeks, legislating caregivers back to work is one thing; expecting them to go back to work and feeling good about the workplace that they have just walked out of because of the stress factor that they face in delivering the services that they feel obligated and . . . a feeling of frustration because they don't feel they're able to give the quality of care that they actually committed themselves to — the oath that they swore when they became a professional and took on the position of being a registered nurse in the province of Saskatchewan.

When we look at this debate, Mr. Speaker, what I find is that at the end of the day while many nurses are going back to work and even, as we've seen by the media and I've heard personally, I've had nurses calling me personally, people are just saying that the situation has not certainly corrected itself. In fact they feel, they feel that the workplace has become more of a stressful place to go to work.

Why do they feel that? Because, Mr. Speaker, they feel they've been forced back into something that they were having difficulty in working with in the first place. And they feel that they've been forced back by a government that has shown a contempt for the parliamentary process, the democratic process. And they also feel that they have let their patients down, their workplace down.

And at the end of the day, Mr. Speaker, I guess what I hear and what I heard even coming back to the Assembly on Monday morning was nurses were basically saying, well what did we go on strike for? It doesn't appear that we're getting any more than what we were originally offered in the first place. They feel let down.

Mr. Speaker, I guess as members of this Assembly we can only hope that the agreement the nurses signed on Sunday morning with the Premier, offering to do full and serious and sincere bargaining, that out of that process of bargaining over the next few weeks, Mr. Speaker, that indeed the issues that the nurses brought to the forefront, that the public in general supported the nurses on, will be addressed.

(1500)

Mr. Speaker, it is my fear that if the government, led by the Premier of this province, do not listen very carefully and do not through their bargaining agent, SAHO, sit down and sincerely bargain the issues of very importance to the nurses, that we may find ourselves in a situation where we're really scrambling to find the staffing that will be needed to fill hospitals.

Because there's no doubt in my mind that there will be many nurses across this province who, having the opportunity, will look at other avenues and other areas where they will decide to ply their trade, where they will move to, because they will feel . . . They're feeling that they're really not needed or wanted in the province of Saskatchewan. And they're going to look at communities and locations where they feel the opportunity to work and to provide the training and the expertise they have and provide the care will be offered to them.

Mr. Speaker, the motion before us basically says that the government has fumbled the ball. The motion before us, basically what it says, Mr. Speaker, is that the Premier fumbled the ball. And what it says is that the government really didn't enter into those meaningful negotiations.

In fact, Mr. Speaker, I would have to suggest — and many people share this opinion — that the government was basically looking at a reason to bring in back-to-work legislation. It's almost like they wanted to see the nurses go on strike. They wanted to have the opportunity to say to the electorate of Saskatchewan; we're in control; we know what we're doing; we're going to make sure that nurses are back to work; we'll bring in legislation if they go on strike. They were just waiting for them to go on strike.

And if the member from Lloydminster doesn't believe that, Mr. Speaker, I've been told directly by individuals who were at the bargaining table, of the many occasions they were at the bargaining table on one day, they'd go to the bargaining table the next day and find that the representatives of SAHO had totally changed and they had to basically go through the process, the motions, all over again that they had discussed the day before. And it was from one day to the next; it just seemed that there was no meaningful effort or attempt or willingness, Mr. Deputy Speaker, to address the issues in front of them.

That is why I believe, Mr. Speaker, when it came — Mr. Deputy Speaker — when it came to the end of the day, that is why the nurses, after they had sat down and the Premier had met with them for 12 hours, well everything we have seen and heard indicates that that meeting on that . . . that meeting on Wednesday — I forget the exact date — where the Premier says he met with the nurses, was the representative of the nurses were only with the Premier for a just a few short moments of time; I believe less than an hour.

Mr. Deputy Speaker, what that is saying and what the nurses took from that was the negotiations were not as meaningful as the Premier and the Minister of Health would like us to believe. As a result the nurses responded.

Mr. Deputy Speaker, we talk about this province, we talk about — and I believe the province of Saskatchewan is a good

province — and in fact it's a great province. I appreciate the fact that I've had the privilege of living, being born and raised, in this province. And, Mr. Deputy Speaker, I do like the province of Saskatchewan.

I believe this province has so much to offer. Mr. Deputy Speaker, Mr. Deputy Speaker, this province has so much going for it. And yet when we listen to the government, the government seems to be at the present time . . . or the last few days was more in a confrontational mode rather than it was in actually dealing with individuals such as the nurses.

It's interesting, Mr. Deputy Speaker, when the nurses went on strike and then defied back-to-work legislation, how quickly when the SEIU (Saskatchewan Employees' International Union) contract came up the Premier moved in and instead of threatening legislation basically said would you agree to a mediator. And, Mr. Deputy Speaker, we see what took place as a result of a mediator moving into the situation.

One has to ask — and certainly those are some of the issues that we've raised and asked the government to do — one has to ask themselves where would we be today? Would we have gone through 10 days of a nurses' strike if the Premier, when he had met with the nurses on that Wednesday, would have sat back and said, well, I don't think we're really going anywhere, and rather than pushing this issue because I think we're just in more of a confrontational mode there was . . . It was very obvious that SAHO had drawn the line in the sand, and certainly the government had, and SAHO really had no place to move because their orders basically come from the department. The only negotiating power they have is what the department gives them, and the nurses had their line drawn in the sand.

Would it have been that difficult for the Premier to say, I think at this time we need the opportunity for some cooler heads to prevail. Would it be possible for us to agree to a mediator and sit down and allow nurses to continue to perform and continue to work the floors of the hospitals, and allow a mediator to sit down and come to an agreement before we get to the heavy-handed tactics of back-to-work legislation.

Mr. Deputy Speaker, I believe, I firmly believe that nurses would have certainly agreed to that. Before they made that final decision they would have agreed to allow for a process of mediation to take place if that might have worked. And I'm sure that they would have entered into it wholeheartedly if they knew that SAHO and they could sit down and bargain all the issues — like the workplace problems, like the recruitment issue, like addressing the issues of the Dorsey report and implementing all the concerns surrounding the Dorsey report.

And, Mr. Deputy Speaker, what nurses were telling me, they didn't expect that to be implemented all in one day. They didn't expect that to be implemented all in one year, that the issues and the equality as a result of the amalgamation of unions to be settled in one year. But they wanted a commitment by the government, through SAHO, Mr. Deputy Speaker, to sit down and meaningfully address these concerns and agree to a time period whereby the inequality or equality concerns would be addressed and would be implemented.

Mr. Deputy Speaker, I believe, in talking to the nurses I've

talked to, that they would have been more than happy to agree to and accept that. That was a workable agreement.

But, Mr. Deputy Speaker, what I found in talking to most of the professionals, talking to business men and women in our community, and as I indicated earlier in suggesting it to the Speaker, many people in our rural communities certainly are tied directly or indirectly to the nursing boards or the health care profession as the health care . . . whether it's hospitals or care homes, are major employers in our smaller communities.

And most people felt that if meaningful negotiations were entered into, that the health care system would continue to function and no actions would be taken. And they were dismayed to find that the government basically states this is the end of the road, this is the bottom line, we're not prepared to go further; and they weren't prepared to move, and if need be we will indeed implement back-to-work legislation. And that, Mr. Speaker, just infuriated the situation, and as a result we have had a 10-day strike.

When I think about the issues that led up to it. I look at a *Leader-Post* headline, Monday, March . . . Monday, April 19. We see, and I quote from this *Leader-Post* article. It says:

Just two days after meeting with SUN, Romanow then met with the Service Employees International Union (SEIU) representing support workers in the health sector.

A journalist asked Romanow how he can avoid the fact that he has set a precedent after meeting face-to-face with two health unions.

"By saying no to some of them, if not all of them," he replied with a laugh on Wednesday after question period.

"Do I regret it? Not at all. Would I do it again? You're doggone right."

Mr. Deputy Speaker, with words like that I can see why the nurses responded in the way they did.

And it was just an indication, Mr. Deputy Speaker, that the whole confrontation we just faced was a confrontation that, it appeared, was being used for political purposes rather than at sitting down. Because the Premier wanted to have this issue of health care debate and the union agreements all settled and out of the way so that he could call . . . set himself up to call that June election.

Now, Mr. Deputy Speaker, what's taking place today doesn't necessarily mean we're not . . . that a June election is certainly not in the cards. At least I don't believe that it has interfered. While some of the media would argue that . . . media is arguing that the Premier is now backing away from a June call, my feeling is that a June call is certainly available and an option that the Premier has to consider.

And, Mr. Deputy Speaker, if you have any insights as to whether June is on or off that the opposition caucus would certainly seek your guidance in that regard. However, Mr. Deputy Speaker, I would like to suggest to you that my colleagues and I, if indeed the Premier wants to and is prepared

to call a June election, we will be ready. And we're more than willing and ready to enter into that fray right now.

Because, Mr. Deputy Speaker, the province of Saskatchewan needs to have the opportunity to judge this government on their record, a record that as we see certainly is dismal in many areas of the province. While many of the members would argue that it is one of the best records that people across this province and across this country have ever seen, Mr. Deputy Speaker, many people are questioning the integrity and the willingness of this government to set an agenda and have a vision for the future.

Mr. Deputy Speaker, there's no doubt that the government, and certainly the Premier of this province, have to take the blame, have to accept the blame for the condition of health care in the province of Saskatchewan. They have to accept the blame for where we sit today. The fact that we have a workplace . . . People going back to a workplace, going back to a workplace where there are certainly a lot of annoyances amongst the workers. There's a lot of . . . a feeling of betrayal.

And, Mr. Deputy Speaker, I think each and every one of us as possible health care users, because we're not guaranteed even, even today that we may not sometime even later today as a result of an emergency situation be called upon or need to use . . . utilize the health care system.

And I think, Mr. Deputy Speaker, if for some reason I was to end up in an emergency ward, I would want and I will want to feel that I have a person caring for me who doesn't have a grudge on their shoulder. A person who is really applying a . . . is conducting themselves with the utmost of professional conduct.

And, Mr. Deputy Speaker, what I hear in talking to nurses is there's a lot of dismay. It . . . as my colleague indicated, it will take some time for us to overcome the difficulties of the past strike action that was taken and the 10 days of strike action that was taken.

So Mr. Deputy Speaker, having made those few comments, I certainly would have to agree with my colleague, the member from Cannington, that this government has to accept responsibility.

And the sooner this government accepts responsibility and recognizes the responsibility it should accept and apologize for some of the . . . for the issues that it has led us, the people of Saskatchewan, down on, in. And indeed we hope, Mr. Deputy Speaker, that meaningful negotiations now take place so that at the end of the day, when everything is said and done, that all the nurses across this province can feel comfortable and that they have received the fairest . . . And I believe they're looking for, what they're looking for is a fair and meaningful contract that would give them the opportunity to apply their services to indeed meet the needs of the patients across this province so that everyone can be assured that health care continues to be a number one — not only a number one priority, but a top quality service to the people of Saskatchewan.

Thank you, Mr. Speaker.

Mr. Kowalsky: — Thank you, Mr. Speaker. I've been listening

to some of the remarks made by the members opposite and I must commend the member from Moosomin that he actually had some suggestions, some positive suggestions which I think shows that he has been doing some listening, and so I was quite pleased to hear that.

I can't say the same for the member from Cannington that spoke before him. Because the rhetoric coming from that member on question period and today is full . . . seemed to be quite full of venom and to the extent that sometimes his face gets so red when he's talking about these things that I wonder that he may not have to access that system if he gets any more excited about it.

The problem is, Mr. Speaker, I think that he doesn't quite believe in everything that he's saying, because from him it's been words of condemn, condemn, condemn, condemn and blame, and condemn and blame. And, Mr. Speaker, so as a result of listening to that and having a look at the motion that was presented before that, when I finish speaking I will be moving an amendment to that motion. And the amendment will read this: I will move:

That all the words after the word "Assembly" be removed and replaced with the following:

That the Assembly encourage the government, the negotiators for SAHO, and the negotiators for the health care unions to conduct the current negotiations in a fair, even-handed, and thorough manner, balancing the best interests of health care professionals, the public, and the taxpayers of Saskatchewan.

Why that motion, Mr. Speaker? Because when you take it all in balance, when I take it all in balance, what I have heard as I have been . . . throughout the strike, what I've heard from nurses and other health care workers and administrators prior to . . . in the months prior to the strike — actually in the year prior to the strike — what I've heard directly from nursing managers prior to the strike, is that the working conditions for the nurses have been getting more and more complex, more and more difficult, more and more demanding, and that it's been rather frustrating.

(1515)

And I was so pleased when these issues were addressed at least in part in the budget. A hundred and ninety-five million dollars in additional money to the health budget, the biggest amount ever — the biggest amount ever added to a health budget.

And what was it there for, Mr. Speaker? Well it was there to address most of the causes that have been identified through the strike. Right in the pamphlet that we put out, Mr. Speaker, that the Government of Saskatchewan put out on the budget: it's entitled "... building our future ... the Saskatchewan way," based on the Speech from the Throne for Saskatchewan 1999. And the issues were identified right in the pamphlet: \$195 million for what?

For, number one, a plan to reduce waiting times for key procedures. Key procedures, Mr. Speaker. Because we are finding that the waiting times in some cases was getting longer

than we were comfortable and we used to, and we would think that in our society we should be able to streamline those.

Number two, improvements for cancer treatment. With more technology available, better success rates with certain procedures. We have learned how to do certain things, the medical system has learned how to do certain things better. We want them to do more of it.

Number three, the multi-year plan for women's health needs. An identified need, Mr. Speaker, and we're willing. And I'm very pleased the Minister of Health was able to get this item in there.

Less time spent on administration, Mr. Speaker. There has been already a decrease in the amount of time spent by administration . . . in administration, the amount of money spent in administration. And in my own district, the number of administrators has been reduced tremendously. The number of nurse . . . the number of managers has been reduced. In fact, it created a problem during the strike because we didn't have enough nursing managers and other managers to handle it, but fortunately there were some workers that were able to come in and spell off during the very intense times.

But point number five, and perhaps most significantly dealing with the issue at hand, and I read directly from the government handout, the official handout, purpose for the 195 million is to work with health providers to make sustainable improvements to working conditions and terms of employment so they can provide better care. Exactly, Mr. Speaker, what the nurses were fighting for in their contract talks, exactly what.

And that's why I was so pleased that, with the exception of 22 per cent on the grid, that the talks are leading to solving the issues which have been identified for some time, however, the methodology of addressing them has not yet been totally agreed to. But I therefore encourage those negotiators in SAHO, those negotiators with the people that negotiate for the health care unions to conduct the negotiations with this end outcome in mind.

Mr. Speaker, nothing speaks — affects a person, I guess — more directly in health care than personal experience. You can read a lot of books. You can listen to a lot of people. But if you actually are able or have the opportunity or — perhaps it's not such a great thing — but to actually go to the hospital with a relative or a friend or on your own and experience for yourself what is happening, you get a pretty good feeling and it verifies what you may have picked up in the literature.

And I have to say that over the last few years, last three or four years in particular, when I've had those opportunities to visit some of their major hospitals, and not just as a politician but as a relative or a friend for somebody in need of services . . . Just today as a matter of fact, Mr. Speaker, I have a very close relative who is in the one of the Saskatoon hospitals undergoing a operation, a cancer . . . involving cancer. This operation had to be postponed as a result of the strike. I was so impressed when yesterday we got a phone call from the doctor in charge and asked us to bring our relative in to the hospital by 3 o'clock so that the operation — pre-op could take place and the post-operation could take place today.

This is a case involving cancer; it's a case where the doctor said this has to be done now. And you know I was so pleased that the system was able to respond to it now.

I might mention that that this has been an ongoing battle and I've been in the hospital several times. Once — and you have to go through, as you know, through the . . . when you go to the hospital, you go to admitting and they send you to the outpatients and in each case you might have to wait your turn — once, I recall, it took an entire hour and a half to get through that process.

The second time that I was in there, I happened to drop the patient off at the door and I went out to park the car. By the time I parked the car, he'd been through the waiting room and was into the in-patients. We were actually 15 minutes ahead of time. I went to the in-patients for company and within 10 minutes the doctor was there. Five minutes later the testing process was done and we were out of there within 20 minutes.

So, Mr. Speaker, you get rather impressed with the way people react and the way people treat individuals who need help. I believe that they deserve nothing but praise for trying to . . . for working and putting . . . making the system work in the way that it does.

And you know, Mr. Speaker, the interesting thing is, when you look at the statistics, is that there are thousands upon thousands more like that. There are occasional cases that it takes a little longer — there are occasional cases. I had a situation myself where I had a little situation where I had to go see the doctor — I had a piece of wild rice stuck in my throat, Mr. Speaker — and I waited for two days and it wouldn't come out.

And when I went to the hospital, to the doctor, he sent me to the hospital because he couldn't deal with it. His tweezers weren't thin enough to reach down. So they sent me to the hospital. And I had to wait an hour, but, Mr. Speaker, when I looked around, the people that were coming in there were not nearly as well off as I was who had a mere little itch back here that had to be treated with a very specific piece of tweezer.

But nevertheless it was a successful operation, Mr. Speaker, and the patient lived.

Some Hon. Members: Hear, hear!

Mr. Kowalsky: — I remember when President Johnson was telling us about his experiences with the medical system, but I want to bring another example. Well, no. What I wanted to mention . . . the reason I mentioned this, Mr. Speaker, this previous example, is I wanted to say that I've seen through personal experience, that the out-patient system that is being used in our hospital and our health system, the out-patient system works. And I also use that same example to show that the clinical system works.

And I want to give you another example to show you, to tell you how I experienced that a palliative system works. And again it's with my own family. A year and a half ago, well we went to the hospital. It was my father in this case. My father was suffering from an aneurysm. The doctor advised he's had to have an operation. He had to have two.

The operation was not successful, Mr. Speaker, but the thing that I recall very, very vividly is when the people in the hospital realized what was going to happen — that the end was near for my father — how they switched from the acute care system to a palliative system. I didn't recognize it at the time of course; it's thought a year later that I recognized what they were doing.

But they went into a system which prepared myself, my wife, my brothers and my sisters, and my mother, for the eventuality of my father's death. And, Mr. Speaker, I know also from looking at this that there are thousands more like that, and we are ever so thankful and grateful that we have a system, and proud that we have a system that works.

So when I hear people on the other side saying nothing but condemn, condemn, condemn, I say to them take a look. Take a look at the full part of the glass not just at the empty part. Take a look at the entire part and stop focusing on that. And be of assistance. If you want to be of assistance, help us fill the glass, Mr. Speaker. Help us fill the glass.

Mr. Speaker, our health system is based on five basic principles. They are enshrined in the Canada Health Act. These principles are often referred to — they're significant. It was passed in the federal House of Commons; I believe passed by the Pearson government if I correctly remember.

Mr. Speaker, as a matter of fact what happened, the reason it was passed, was because John Diefenbaker who happens to be . . . had been the prime minister from Prince Albert at the time, was looking at the Saskatchewan medicare system. And he thought, hey this is good enough for Saskatchewan, it should be good enough for Canada. And what he did is he set up a commission headed by Justice Hall, Emmett Hall. And Emmett Hall came back with the recommendation to implement these five principles of health.

It started in Saskatchewan; went through the Conservatives; went to the Liberals; was accepted by the entire country; and is still accepted to this day, Mr. Speaker, as something that probably we identify more with as Canadians than anything else.

Mr. Speaker, these principles — public administration and public funding. Why public? Well, Mr. Speaker, because it involves everybody. Everyone of us at some time or other accesses the system.

Why public funding as opposed to private funding? I believe it's cheaper, Mr. Speaker. It costs us in this province about \$1,800 per capita per year. But I think if you look at the studies that have been done over the years it'll tell you that . . . the studies will tell you that that's still under 10 per cent of our gross national product compared to the cost in the States where it's approximately 13 per of their gross national product, and here it's accessible to all. We don't have people that do not have insurance, public health insurance.

So the first principle is public administration and public funding. Second principle, Mr. Speaker, is that it's universal. That is, it be made available to everybody not just some people. If we go to a two-tier system, Mr. Speaker, as is advocated quite often, particularly advocated in Alberta, advocated by some

members of the Liberal Party across, then what happens is you end up with everybody not being covered. And quite likely a more expensive system. That's principle no. 2, universality.

Principle no. 3, comprehensiveness. The system should be comprehensive. It should cover all processes: acute processes, preventative processes, palliative care. It should provide also for alternate methods of health care and prevention, Mr. Speaker.

To be comprehensive it requires teamwork. And I think I want to emphasize that, Mr. Speaker. One of my mentors as I was going into politics and I was thinking about health was Dr. Orville Hjertaas, the man who we credit as being the doctor of medicare in Saskatchewan. He was the one that stood steadfast when Ross Thatcher was breaking down the doors of this legislature in protest and the KOD (Keep Our Doctors) were marching all over the place in Saskatchewan opposing medicare.

(1530)

All the doctors went on strike. Woodrow Lloyd had to deal with that — an NDP government. They were steadfast. And as a result we've got our medicare, Mr. Speaker.

But Dr. Hjertaas stressed the concept of teamwork, that you have a whole lot to do and that you should disassemble and reorganize the military model of health care into a team model. And that's what he practised in the community clinic in Prince Albert, which is now known as the Prince Albert Co-operative Health Centre. And his model was picked up in various places but it never did persevere and become dominant. And I think we're the worse off because of that now, Mr. Speaker.

I think the time is now to take another look at how we organize our system, our hospitals, and how we organize the way people interact. Should everybody just wait till they get an order from somebody else before they act? Particularly nurses? Particularly LPNs (licensed practical nurse)? Or could we form a more holistic system where people . . . where the caregivers consult?

One of the things that we're missing now, Mr. Speaker, in our system is the kind of care that my father used to talk about in what he called the old days. That was through the '30s and the '40s where they knew the doctor and the nurse, and the doctor and the nurse knew them throughout, throughout their lives — certainly throughout any particular procedure. And so there was somebody there. There was that personal touch. Somebody that they knew cared and they knew understood the problem. And they were never lost; they wouldn't get lost in a hospital corridor, or going from clinic to hospital, or from place to place. That human element of staying in contact with somebody that you know you could go to or feel confident in as you're going through a process. We now have the high-tech, Mr. Speaker, but we don't all necessarily have the high touch. And I believe what the nurses are telling us is that we have to pay a little more attention to the high touch.

Mr. Speaker, I'm talking about the five principles of medicare: public administration, universality, comprehensiveness — that's three of them. But the most important one, perhaps, is accessibility. You can have a system that's universal and

comprehensive, but if everybody can't get at it, it's not worth very much to those people that can't get at it.

So, Mr. Speaker, it's important that it is accessible to the north part of Saskatchewan and the southern part, and the rural and the urban. And with today's transportation and today's ambulance system and today's air ambulance system and today's communications, we're able to shrink a lot of these distances, Mr. Speaker, and there's very few places that are more than 40 or 50 minutes away from a hospital or from acute care services of any kind in Saskatchewan — a very, very small percentage.

And last of all, Mr. Speaker, in addition to those four principles — public administration, universality, comprehensiveness, and accessibility — is portability. That is, we should be able to take our medicare with us to Alberta, to Manitoba, or to Ontario or any other part of Canada when we're going visiting or if we're going on business. And that is by and large in place, Mr. Speaker.

Now, Mr. Speaker, prior to the session starting, I was in discussion with some nurses about what was happening in the hospitals and other health care workers, and I was given this little booklet, which is a summary of a study conducted by a company called E.C. Murphy. And the title of this study is called *Complexity in Nursing*. And it, Mr. Speaker . . . it was a study taken during the period 1994 to 1996 that involved more than 170,000 health care workers, which included 47,692, exactly, registered nurses, and 138 acute health care facilities. And this, sir, was done in the United States of America, published by E.C. Murphy, Ltd.

Mr. Speaker, the study I found — although it was done in the States — seemed to address the issues which we have found right here in Saskatchewan. Although their system varies somewhat, but some of the procedures and the frustrations that their nurses are faced with I think are similar to what our nurses are faced with.

And I want to read some parts of this study into the record, Mr. Speaker, because I think it's something that . . . I think it's something that our administrators, our health nurse managers, and perhaps even politicians ought to pay some attention to.

It starts out this way, one of the items it says is:

More than 65 % of the work performed by a nurse is, in some way, influenced by others, including physicians, administrators, regulatory agencies, or professionals from other disciplines.

Now, Mr. Speaker, this speaks to locus of control as we educators call it. If you feel that you've got some control of the situation that you're responsible for, then you'll do a better job of it. But if you feel somebody else is telling you what to do all the time or 65 per cent of the time as was found in this case, it makes much more difficult to be a professional on the job.

Another item, Mr. Speaker. It says:

A recent study of the registered nurse's role supports the theory that complexity in the health care system has led to

complex work lives for nurses, with accompanying low morale, high levels of stress, fragmented care delivery systems, patient and physician dissatisfaction, and increased healthcare costs.

This is in the United States of America, Mr. Speaker. But what do they mean when they say complexity? They define it, in this little booklet, and they say that:

The average number of activities that a nurse has to perform is 74.

Seventy-four different tasks on the job — that's just the average. So those nurses that are working in situations which are considerably . . . which increase in complexity, I can see that figure going up to over a hundred. Now that's enough to drive anybody batty, Mr. Speaker, even the most capable of us, of us human beings.

Mr. Speaker, another item from the study:

On the average (it says) 51 per cent of registered nurses' time is spent on activities outside of the core of the registered nurse role definition.

It would be interesting to find out what that percentage is here, Mr. Speaker.

I want to just flip through and just give you one or two more quotes from here, Mr. Speaker. But here's one of the things that they say when they talk about why the current solutions that have been presented to the nursing and acute care situation have not worked. And it says this is the reason:

(Because studies in the past) retrospectively show whether things were "wrong" rather than assist nursing leaders in proactively putting the right person in the right place, doing the right work, at the right time, at the right cost.

It says:

. . . they do not (the studies on motion) do not produce a road map for achieving (this). By focusing on outcomes to the exclusion of process . . . systems make judgements about productivity of nursing units without regard to mitigating factors — such as complexity — that reduce . . . inefficiency.

And in summary, Mr. Speaker, they say this:

As demonstrated by the ineffectiveness of current tools, any approach to staffing or work redesigning based primarily on (full-time equivalents) is flawed in its ability to recognize the quality and quantity of nursing work . . . What our RNs do and how they do it are both more important than simply how many RNs there are. RNs may have overestimated the value of staffing ratios and skills mix in hospitals and underestimated the importance of the organization of nursing. And one might add, the organization of the rest of the health care system.

Is the summary reached here, Mr. Speaker.

So their conclusion is, based on that summary, and I'll read one sentence and that is:

By taking action to reduce complexity, nursing leaders can have a profound effect on staff morale, patient care, and the affordability of healthcare. Taking responsibility for work redesigning across systems can allow nursing to further the noblest aims of the profession.

Well, Mr. Speaker, what I learned from all that is it verified some of the things that I'd been told as I go speaking to health care professionals. And it tells me that we could use an opportunity like the one that's with us right now, to look at how things are organized in the system, see what kind of overlap there is in the system.

The book also speaks to overlap. This study speaks to overlap. So that . . . not so that people will do more work — goodness sakes, they're worked enough — but so that the work that they do is done more efficiently.

You know, Mr. Speaker, it comes down to organization in many cases. As somebody that's operated an office, which you have . . . I know, Mr. Speaker, that when you get your mail in the morning and you start opening it and if you just open some of them and put it from one side of the desk to the other side of the desk, come back later and redo that mail, move it one more time and a third time and fourth time, you'll probably agree that wasn't your most efficient day.

But when you took your mail and you took it one step at a time and dealt with each one in hand and disposed of it, your organizational . . . and were organized in that fashion, you know that you could do . . . you could leave yourself a lot more time to do other things.

Well there's probably things like that that we can do in our system because we still are, by and large, very hierarchical within the system. And perhaps it's time to take a look at that and look at the teamwork concept that I talked about earlier and that was recommended to me from away back, Mr. Speaker, by Dr. Orville Hjertaas.

Mr. Speaker, I had talked earlier about the thousands more of . . . of thousands of procedures that were done and are being done by our system. And I just want to spend a minute telling you just how many thousands of procedures there really are. I have some stats that have been given to me and I want to just take and share this with you, Mr. Speaker.

During a normal day, an ordinary day or an average day in Saskatchewan, there are 35,000 people that access our health system — 35,000 people. That's like taking the entire city of Prince Albert and putting them through some part of the health system — see a doctor, see a nurse, go to a hospital, go to see a physiotherapist — involved in some way with a person that is being paid by the medicare system. See how complex this really gets.

Last year, when it came to cataract surgeries, there were 11,000 of them done in the province of Saskatchewan. That was up 300 per cent over a period of 10 years. So we're accessing the system far more and putting far more pressure on it than we

ever have.

You know how many visits there were to doctors over a period of one year in Saskatchewan for a million people? A person might wonder, well would it be sort of an average of one per person or two per person? The stats show that the average person visits a doctor 4.6 times a year; or for the million of us, 4.6 million times there were visits to physicians. And they've got to cope with the 4.6 million visitors and they've got to keep track of this. And there were nearly a million visits to specialists.

Mr. Speaker, the number of operations that are conducted in Saskatchewan last year were 91,000. That all has to be organized with pretests, post-tests. You need post-operative care; you need to have the lab system activated for that. Operations in some cases have gone up considerable; in the case of hip and knee operations, they're up by 87 per cent.

And the drug plan, Mr. Speaker. How many families in Saskatchewan access the drug plan? Eighty-eight thousand is the answer to that question — 88,000 or 30 per cent of all families in Saskatchewan access the drug plan per year.

Well, Mr. Speaker, when I see all of these numbers and I put it to the personal experience that I've had in our system, I really have nothing but praise for the people that run it and the people that work in it. And I have nothing but support for good, positive suggestions as to how things can be improved so that we can maintain the system.

(1545)

I was very glad, Mr. Speaker, that in this year's budget that there's room made for another two MRIs. Last year there were 5,000 MRI scans made in addition to 46,000 CT scans. Technology is working for us, Mr. Speaker. We've got the high-tech; what we need is the high touch.

One more thing I want to mention, Mr. Speaker, and that is . . . There's one more statistic and that is the preventative end. Because without the preventative end, Mr. Speaker, our system would collapse, and of course our health would collapse.

But, Mr. Speaker, there are annually, 400,000 immunizations in Saskatchewan. 400,000 people are immunized or in some cases are immunized more than once, but there are 400,000 immunizations. And the significance of that, Mr. Speaker, is that that is a preventative method. That is something that keeps people out of the system and keeps us living longer.

In fact, Mr. Speaker, in a study done by the US (United States) Department of Health and Human Services, they credited that clinical medicine, as opposed to preventative medicine, is credited with only five of the thirty years that have been added to life expectancy since the turn of the century. Only five out of the thirty is due to clinical medicine — all the high cost stuff we do.

Preventative medicine: immunization, washing your hands, good food, a little bit of exercise — that has been the main component of us living longer right across the nation, Mr. Speaker.

Well, Mr. Speaker, I'm going to close my remarks on this motion by making the amendment now, and the amendment will be seconded by the member from Moose Jaw Wakamow, or are we ready? The member for Battleford-Cut Knife, Mr. Speaker.

So moved by myself, seconded by the member from Battleford-Cut Knife, I move:

That all the words after "Assembly" be removed and replaced with the following:

Encourage the government, the negotiators for SAHO, and the negotiators for the health care unions to conduct the current negotiations in a fair, even-handed and thorough manner, balancing the best interests of health care professionals, the public and the taxpayers of Saskatchewan.

Some Hon. Members: Hear, hear!

Ms. Murrell: — Thank you, Mr. Speaker. I would like to take this opportunity to commend the people of Saskatchewan for their support, their co-operation, and their understanding of the extreme circumstances this province has faced during the past 10 days: the co-operation with health facilities, using them only in emergencies; the support of both our government's position and our registered nurses' position; the understanding of our province's financial situation.

Health care has and will continue to change — technology advances, prolonged life, different illnesses — and these changes have a profound impact upon those people who work in the system.

In the past eight years health delivery has been restructured. With the changes to boards and districts, the basic needs of our communities are being addressed by people who live and work in our communities.

Mr. Deputy Speaker, services were amalgamated, boards were consolidated, administration costs were reduced, services were enhanced, and problems were created for staff members through the Dorsey report recommending the combining of various collective agreements.

For example, Mr. Speaker, you might have one union representing the hospital workers, another union representing long-term care people, another union representing mental health, and another union representing home care.

Mr. Dorsey indicated the Saskatchewan Union of Nurses would represent all of the registered nurses. SEIU, or Service Employees' International Union, would represent the support workers and various health districts. CUPE, or Canadian Union of Public Employees, would represent other support staff in other health districts.

SUN now represents most in-scope nurses in this province that work in health districts. And they are trying to negotiate a master agreement that basically covers 10 different agreements.

Issues that have to be resolved are different hours of work,

different vacation leaves, different benefits, different rates of pay — many issues, Mr. Deputy Speaker.

Our government determined that it was extremely important that we have the mandate which all other public sector workers have had — that's 2, 2, 2, and 1 — and that there would be funds available to deal with the serious issues that arose out of Dorsey to deal with some of the imbalances in the system.

Money was provided for that. This government recognized the importance of pay equity, and now the health sector will be able to evaluate the job process to get equal pay for equal work in order to improve the wages of people who work in the health sector.

The SUN's collective agreement expired on March 31, 1999. And the past 10 years . . . the past 10 days have been a difficult time for all involved. But I believe that we will ultimately have a stronger health care system. The framework agreement signed by SUN, SAHO, and the Premier allows flexibility to address the conditions of work and nursing practice issues.

The main issues are salary increases of 2 per cent for each of the next three years. An additional 1 per cent to cover professional fees, health and dental benefits, recruitment and retention of nurses. Workplace issues including seniority, nursing practices and the creation of more full-time jobs have been addressed.

This contract is worth 13.7 per cent over three years. The same rate provided for recent agreements with CUPE and SEIU. This framework will result in a contract that is fair to nurses, fair to other health care workers, and affordable for taxpayers.

Measures will be taken to improve working conditions allowing them to concentrate on quality patient care. Our leader and our government are committed to building the best health care system. And with our partners we will refocus on achieving this. By listening to and by respecting each other we will find solutions.

Mr. Speaker, the threat of privatization of health care in Canada is the biggest challenge we face. This government will do everything to oppose what I believe is the greatest danger facing health care.

Mr. Deputy Speaker, our position is clear. But, Mr. Deputy Speaker, the position of the Tories is also clear. The Tories believe in a privatized American style system which costs more, has higher administrative costs, lower quality of care, and provides coverage for fewer people. A party that wants to freeze the health budget, other than for the rate of inflation along with the freeze on education, for not one year, not two years, but for five years.

Mr. Speaker, other leaders may have had . . . Mr. Speaker, other leaders may have done things differently, but the Liberal leader . . . Mr. Speaker, other leaders may have done things differently, but the Liberal leader, we know his position — the law doesn't matter to him. And the would-be leader of the Tories, we don't know — silence. No press releases, no memos, no public appearances, no phone calls. Ten days of the nurses' strike and not a word from the Tories' leader — silence.

Where's Elwin?

Mr. Speaker, this government is proud of the health care provided to the citizens of Saskatchewan. Universal health care, accessibility, portability, comprehensive coverage, and non-profit, public administration — the foundation of the Canada Health Act; the cornerstones on which health care will be maintained and enforced.

Mr. Speaker, my constituency of Battleford-Cut Knife encompasses three health districts and each district is unique. But all three responded promptly to ensure the quality of care for our people was there, everyone co-operating and responding to the needs. I commend everyone for the job well done.

Mr. Speaker, I would also like to commend the nurses of the Wilkie area for their commitment to the health centre fundraising project. Mr. Deputy Speaker, Friday evening nurses catered an excellent meal for the public enjoyment. I'm not sure of the total funds raised for the meal and the silent auction, but it was a very well-attended event.

I am proud of my leader, my government, and our Saskatchewan people. Therefore it is a pleasure for me and an honour to second the amendment.

Some Hon. Members: Hear, hear!

Mr. Hillson: — Thank you for the applause, members opposite. I assume that was intended for me.

Mr. Deputy Speaker, I have to say that two weeks ago when the news came over that the Premier was meeting for the day with SAHO and SUN, I was relieved. I was initially impressed that the Premier was going to try to resolve this dispute without disruption to our health care system.

And when I heard that it went on for 11 hours, I took that as a good sign that no one had left after a few moments but that the parties had remained talking to each other for 11 hours. I thought that was a good sign.

So you can imagine how I felt when I was told that, in point of fact, the Premier had spent all of about 15 minutes with the executive of the Saskatchewan Union of Nurses and that, in point of fact, the negotiators had spent most of their day cooling their heels in a side room. And I was even more disappointed then to learn that the NDP's efforts that day were directed not so much at the negotiations with SUN but rather printing off the Bill to send the nurses back to work and arranging for ads to go out in the province's newspapers accusing the nurses of being greedy.

So getting the legislation in place and getting this expensive media campaign in place was apparently the real priority of that day rather than attempting to negotiate a settlement which would have avoided the disruption to our health care system.

Well I have said in times past that I think we all accept that in a democratic system it sometimes becomes necessary to legislate an end to strikes in the public interest. We all know that there are times in a democratic society where the interests of a particular group or individual have to take second place to the

public interest, to the good of the whole, and our challenge is to balance that meeting the public interest and the public good with individual and group rights such as collective bargaining.

And then I remembered that it had only been a week or two previously that the federal government had legislated an end to the grain handlers' strike. And that was another clear case . . . that was another clear case where . . . (inaudible interjection) . . . We know that over the grain handlers' strike, all parties in this Assembly took the position that it was necessary to legislate an end to the strike in order that the disruption to grain shipments and the losses to our farmers would end. However, as I thought through this more, it seems to me that there is the world of difference between the legislation in the case of the nurses in Saskatchewan and the legislation in the case of the grain handlers. And what is it?

(1600)

The government made a sincere, honest, and long-term attempt to negotiate a settlement with the grain handlers. The grain handling system had been disrupted and shut down for some time, and our federal government was forced to take the position that collective bargaining in this case had tried and failed and had to be supplemented by legislative action.

The federal government took the position that the interests of one group could not be allowed to compromise the interests of the nation and the national good. And I think all members of this House are in agreement with that.

In the case of the nurses' strike, though, calls were going through in the middle of the night to have us return at 8 in the morning to legislate an end before the strike started. Well negotiations were going on apparently and ostensibly for the purpose of avoiding an impasse; in point of fact, the government's efforts were directed at a media campaign trying to turn public opinion against the nurses.

And most upsetting of all, apparently very little time was actually spent negotiating with the nurses. Apparently they spent that 11 hours by and large cooling their heels in a side room.

Mr. Speaker, I accept in theory — I accept in theory, and the Liberal Party certainly accepts in theory, that there are times in a democratic society when collective bargaining breaks down and legislative action will be required to protect public safety and the public good.

But I respectfully submit, Mr. Speaker, that in this case collective bargaining was not tried. It was instead a case, not that collective bargaining had failed, but it hadn't been used. It was circumvented and it was circumvented because SAHO had been told in advance that they did not need to get a settlement because government would legislate a settlement.

While I certainly accept that sometimes we need legislative action to protect the public interest, it seems to me first of all there has to be an honest and sincere attempt to try and make collective bargaining work and succeed. That did not happen in this case.

In this case SUN was negotiating with a government which did not want the collective bargaining process to succeed.

We also know, Mr. Speaker, that the problems in our health care system did not emerge overnight. We know that the problems have been of some years' standing. When we laid off 600 nurses; when the graduates of our nursing programs were leaving for Texas because there was no work for them in Saskatchewan. And well, our nurses who did stay here found that they'd spent several years sitting on casual lists as health districts refused to offer permanent and full-time positions.

I may say, Mr. Speaker, our health districts may have been spoiled in the days of nursing surpluses. They have found a number of advantages to placing nurses on casual lists as opposed to offering them full-time employment. But now the situation is changing. And I am frankly getting calls from health districts where they are telling me that it's getting hard to maintain a casual list. And they're running into nursing shortages. And some of our health districts are wondering why people are not prepared to go to, say, Meadow Lake to sit on a casual list.

Well in a day and age of nursing shortages, it is being highly unrealistic for any health district to think that someone is going to move into rural Saskatchewan to sit on a casual list. They are simply going to have get with the program, and I am hopeful that this settlement will move in that direction.

In that regard, Mr. Speaker, I am told that Hafford Speers has been circulating an appeal for someone to move to Speers to sit on a casual list. If they are serious in my friend's seat in Redberry, if they are serious about providing any health care at all there, they will have to allow full-time appointments.

During the recent strike, of course, I had a number of calls, a very large number of calls, and I met with a large number of people. And I reminded them that I am not the only MLA for the Battlefords, and they told me that, well they were trying to get a hold of other MLAs in the region and they could not, that I was the only MLA that they were able to talk to.

And well . . . I tried to keep my constituents aware of my position on the health crisis by being on our radio and being in our newspaper and being available to talk to constituents, nurses and patients, and people working in the health district and the board.

They told me they were trying to get a hold of other politicians in the region. They were trying to get a hold of the other MLAs and they simply could not be contacted and they did not return their calls.

I think it is important that we as elected officials advise our constituents as to where we stand on the pressing issues of the day and that we are at all times available to our constituents to hear their concerns and to receive their input, even in the times we know that input may not be what we want to hear. Even when that input may be somewhat unpleasant to our ears. When we are elected officials, it is important that we be available to listen and to hear it.

Well, Mr. Speaker, the strike is over. We are all grateful for

that. We hope that our health care system will be functioning at optimum in the very near future. And we want that to happen.

But I respectfully submit that in the last two weeks this province was not well served by its political leadership; that instead, instead we see a set-up to appear to negotiate when you're really not negotiating, to set up the failure of those negotiations so that a legislative settlement can be imposed.

And I respectfully submit it would have been a far happier precedent in this province if collective bargaining was sincerely and honestly tried, as it was federally in the case of the grain handlers' strike, so that when the government moved, the government moved because it had no option but to act in the public interest.

It was not a case with the grain handlers that the government set up the process for failure in order that they could look tough. It was a case that the federal government tried to allow the process to work and unfortunately it did not.

There will always be a strong suspicion out there, Mr. Speaker, that in the case of the nurses' strike, the process was not given an honest chance to work because the government wanted it to fail in order that they could legislate the nurses back to work, and that I fear will not set the appropriate environment for service in our health care by health care professionals who feel good about themselves and good about their employment, and we know they are dedicated to their patients.

So I ask all hon. members on both sides of the House to step back, to not look at this from a partisan standpoint, but I ask members opposite, to say, was the rhetoric you used appropriate or was it an attempt to use nurses for your own political purposes? Could it have been done in a more harmonious, co-operative manner that would not have brought the health care system of this province to a state of collapse?

Thank you, Mr. Speaker.

Mr. Calvert: — Thank you very much, Mr. Deputy Speaker. Mr. Deputy Speaker, the enthusiasm of my colleagues is overwhelming.

Mr. Deputy Speaker, as I've listened to the debate this afternoon beginning with the member from Cannington, the member from Moosomin, the member from Prince Albert Carlton, Battleford-Cut Knife, and now the member from North Battleford, I would suggest that we have been treated in some ways to portions of a very classic debate that has occurred not more than a few times in this legislature — being the debate over health care and how we as Saskatchewan people will choose to provide and to deliver health care to people in our province for our people — and there have been elements I think of a classic debate here if one listens.

I would like to begin, Mr. Deputy Speaker, with a short story by way of illustration. I am told, Mr. Deputy Speaker, that there is somewhere off the coast of Greece an island; on which island is a monastery; which monastery is build up in the cliffs overlooking the sea. And I'm told that the only access to this monastery, Mr. Deputy Speaker, is by way of climbing into some woven baskets, which the monks in the monastery then

proceed to winch up the side of the cliff and into the caves. That's the only access in. It's the only access out.

Mr. Deputy Speaker, I'm told that a visitor to this monastery arrived, and the monks of the monastery came to the base of the cliff to lift the visitor up to the monastery. When the visitor had climbed aboard the woven basket, this visitor noticed that the rope suspending that basket, was very frayed, extremely frayed.

And so this visitor says to her monk who was piloting the basket, she said, "Just by the way, how often do you change the ropes on these baskets?"

And the monk replied, "Well, every time they break."

Now I use that little story, Mr. Deputy Speaker, in some ways as an analogy to where we face and what we face in health care in the province today and throughout this decade. We crafted in this province — and as the Premier has said, it has become our greatest gift to the nation — the concept and the philosophy of publicly funded, publicly administered health care. We pioneered it in this province. And the great debates which established hospitalization and medicare occurred in this very Chamber from these very benches.

We, Mr. Deputy Speaker, in Saskatchewan, in some ways wove the basket and wove the ropes of health care delivery in Saskatchewan. Then you see, Mr. Speaker, along came a variety of influences — changing technologies, changing demands on the system by virtue of new illnesses, new technologies. Then we had the circumstance, Mr. Speaker, of the 1980s with the fiscal collapse of the province near, and all of these coming together in the '90s have forced us all, have forced us all to re-think health care and the delivery of health care.

(1615)

Now there are those, Mr. Speaker, in this debate, who I believe would suggest that the ropes and the basket of publicly funded, publicly administered health care, medicare as we have known it, there would be some who would argue that this is no longer sustainable and that we should move from that into a privatized medicine.

There are those as we heard from the member from Prince Albert Carleton today, who stood in this House and again reminded us of the fundamental principles of universal medicare, not only in Saskatchewan but across Canada, and there will be those today who will stand and defend those principles.

Mr. Speaker, in my view, if we seek to preserve the five fundamental principles of medicare, it is incumbent upon us to reweave the rope, to reweave the basket, to reweave the delivery system that we might maintain that system.

Now I listened very carefully, Mr. Speaker, to the member from Cannington in his presentation in this House today. And he came very close if not over the line to recommending to this House the Americanization of health care in Canada.

He spoke quite eloquently about what he sees as the beneficial aspects of the Americanized model of health care delivery. He

spoke to us about waiting times in California, suggesting that the waiting times in California may be considerably shorter than the waiting times in Canada or Saskatchewan. He spoke with glowing terms of the situation in Montana.

What the member from Cannington failed to provide to the members of this House was that further piece of information which is, Mr. Deputy Speaker, yes the waiting lists in California may be shorter if you have the resources to pay for them. If you have the resources in Montana to pay for the MRI, you can get it. But if, Mr. Speaker, you're of a circumstance where you do not have those kind of financial resources available to you, Mr. Speaker, you do not have coverage at all.

Now, Mr. Speaker, my source for making that comment, my source for making that comment, Mr. Speaker, that in the United States of America if you do not have the resources you do not have coverage, is none other than the *TIME* magazine. A very recent copy of the *TIME* magazine — well recent, January 25, 1999 — the *TIME* magazine, American edition, reported that 43.3 million Americans, 43.3 million Americans have no health coverage at all.

An Hon. Member: — Not true.

Mr. Calvert: — Well the member from Kindersley says it's not true. *TIME* magazine, January 25, 1999 says it is true. Take your pick on who you believe.

Then, Mr. Deputy Speaker, I heard the member for Cannington defending the health care system in our neighbouring province of Alberta. They choose, Mr. Deputy Speaker, as you know, to fund a portion of their health care system through a health care premium. As opposed to an education and health tax, the sales tax, they choose to fund their health care system through a health care premium.

The average family in Alberta will be paying this year \$816 in a health care premium, which will be more than the average family of the same size in Saskatchewan will pay in E&H (education and health) provincial sales tax. Alberta chooses to collect that tax through a health care premium.

But as a premium . . . And the member from Kindersley points out that the E&H tax does not in fact pick up the whole tab for health care. That's for sure. That's for sure. But neither, I would remind the member, does the health care premium in Alberta pick up the whole tab for health care in that province.

What I am trying to say, Mr. Speaker, to the member from Kindersley and all members, that with the premium system here is what you run into. Here is exactly what you run into. A headline in *The Leader-Post* reporting from the Government of Alberta, the Department of Health in Alberta, the headline reading, "Many Albertans behind on health care premiums." Now this was reported in March of this year — March of this year.

Last month, this year, the Alberta Department of Health has reported that 123,000 — 123,000 of its health care insurance plan accounts, or about 23 per cent, are now not up-to-date in their health care premiums; they are delinquent. Mr. Deputy Speaker, that's one-quarter of the families who are obliged to

pay health care premiums in Alberta.

Now the compassionate Government of Alberta has taken it upon themselves then, to assign collection agencies — collection agencies — to 40 per cent of those accounts.

Now I heard a member from the Saskatchewan Tory Party say today, but don't you worry; everybody in Alberta is covered. Everybody's covered. That's what they claim. Even though they don't pay the premium. The Conservatives in Saskatchewan say, well never mind, they're covered anyway.

Well let me just read on from this report from Alberta Health and a response to it. I'm quoting now, Mr. Speaker, from this article which appeared in *The Leader-Post* on March 1, 1999:

. . . for some Albertans like Dave, an Edmonton food-service worker, (it is not) reassuring (when they say that everyone will receive coverage).

Dave, who asked that his last name not be made public, was working for an Edmonton hotel that was deducting (his) premiums from his pay.

The hotel owners eventually went broke. Several months later Dave found out they had not been remitting the premiums to the province.

Dave's first clue (was) that he (had) several hundred dollars in arrears when a collection agency started calling him.

He tried unsuccessfully for months to tell the agency and Alberta Health he didn't owe the money but (he's) given up.

"Alberta Health said I wasn't to deal with them anymore, deal with the collection agency . . . And (it's) a lot of fun to deal with (them) — harassment at its finest."

Now here, Mr. Deputy Speaker, is the key point. This individual

. . . says he's afraid to go to a doctor or a hospital fearing (that) he might get inferior treatment because he's so far behind on his premiums. And it would alert the collection agency to his whereabouts.

"I just can't get sick," he said . . .

Now, Mr. Deputy Speaker, I hear the Tories here saying, well don't worry. In that system in Alberta which is moving more and more to the American style, everyone is covered. Well that's what the Tories in Alberta are saying too.

Here's another article, this one from the *Calgary Sun* . . . *Calgary Herald*, dated March 15, this month. The Minister of Health in Alberta . . . deputy minister of Health — sorry — the deputy minister of Health in Alberta says that every Albertan has the right to basic medical care and doctors cannot refuse.

However, Mr. Deputy Speaker, the AMA — the Alberta Medical Association — president, Dr. Rowland Nichol,

disagrees. He says, that's not true, adding he had several patients at his Calgary practice whose medical needs were not urgent and so were told they would have to pay to get treated.

Now, Mr. Speaker, add to that — because we've heard a lot about the Alberta system in this House from the Conservative party — add to that this, this from the *Calgary Herald* on April 3 of this month, that's in this very same month, 1999, headline: "Klein sees private hospitals someday."

Privately owned full-service hospitals might someday operate in Alberta, Premier Ralph Klein said Thursday.

Now, Mr. Speaker, what we have here, as I point out, is in some ways a very fundamental debate about how we will deliver health care in this province and in this nation. It's important that we have this debate. It's been held in this House before, and it should engage not just elected members but it should engage the entire population of our province.

We are in some ways, Mr. Speaker, I think at a crossroads in health care delivery in Saskatchewan and in Canada. And some of the discussion if I may say, Mr. Speaker — Deputy Speaker — has arisen from the very controversial and recent nurses' dispute. It has — if there are some silver linings I think in these disputes — it has caused many of us again to begin to think about the fundamental principles of medicare and how we will build this system in the future.

Now, Mr. Deputy Speaker, the motion which is before us and the amendment which calls upon this legislature to support the government and in particular the Premier for the handling of the strike by the Saskatchewan Union of Nurses, this motion in some ways does cause us to think again about the role of government and the role of opposition. And I think again, in recent days we've had good illustration of both.

It seems to me, Mr. Deputy Speaker, that the role of the opposition is an — it doesn't seem to me, I know it is a very important role — and it is entirely appropriate, I believe, for members of the opposition to take up the cause of a group of citizens or a particular issue within our society and our community. It is entirely appropriate for the opposition to raise those concerns with vigour, to challenge the government of the day. And I would say in the past number of weeks the opposition parties of Saskatchewan have done that, and have done a fair job.

But where, Mr. Speaker, opposition needs . . . where it sometimes crosses the line and becomes less than effective is when that presentation of the issue and the concern becomes only from the point of view of criticism; when it does not contain within it the seeds or prospects of solution; or to be very blunt, Mr. Speaker, when a leader of an opposition will recommend, will recommend to the population of Saskatchewan that it is appropriate to break a law or to avoid an injunction of a court. That, Mr. Deputy Speaker, in my view is opposition gone too far — too far.

The role of government is a different role, Mr. Speaker. I had the opportunity to sit in opposition, and I had the opportunity to raise the concerns of individuals and groups within our community and our society. And I have seen now the function

and the role of government. It is a different function and role. Whereas the opposition in the legislature has the luxury, Mr. Deputy Speaker, the luxury of on a given day being of a single issue — government never enjoys that luxury.

On every occasion . . . (inaudible interjection) . . . I thank the member from Moosomin for complimenting myself and other members for their role in opposition.

In government, Mr. Speaker, there is never the luxury, there is never the luxury of a day when a government can be of a single issue. Government requires the ability, the ability to manage and to govern and to balance the needs and the desires and the hopes of all aspects of the great Saskatchewan community.

And so in health care negotiations, Mr. Deputy Speaker, it is not the luxury of a government that we or any government can provide to one particular segment of health care providers, more or different than is provided and needed and deserved by every other sector of health care providers.

In this current round of negotiations, contracts, collective bargaining, a firm position that this government has held, and I support it entirely, is the need to lift all of our health care providers, not just one group or another, but to provide lift to all.

Mr. Deputy Speaker, we have endeavoured to do that. We have endeavoured to be fair to each and every health care worker and provider in our province, whether it be a member of CUPE in support or a member of SEIU, service employees, in support roles or in licensed practical nursing; whether it be a member of SGEU (Saskatchewan Government Employees' Union); whether it be a member of Health Sciences; whether it be a member of the Saskatchewan Union of Nurses; or whether it be a member of the Saskatchewan Medical Association. We have endeavoured throughout to bring balance and fairness to all health care providers.

And as we seek to provide fairness and balance to all health care providers, we cannot on any day, Mr. Speaker, forget that we have responsibility for other important public services whether it be in the field of education with our teachers and our trustees, or whether it be in the line delivery of government through departments like Social Services and Social Service workers, or whether it be to third-party funded. Whether it be to the infrastructure of our province — the roadways, the parks — there is not a day, Mr. Speaker, that government can neglect those priorities as well.

In each and every decision of government and each and every activity of government it is important to seek balance in the very high priority of health care, but equally in education, social services, and so on.

And, Mr. Deputy Speaker, there cannot be a day in government that one neglects or forgets to whom we are responsible — that being the electors and the taxpayers of Saskatchewan. And each of our decisions must be made with the public interest in mind.

And so, Mr. Deputy Speaker, in the context of the most recent dispute and the activities of that dispute within the union, within government, within SAHO, I believe this government has

sought from day one, and continues to seek through the bargaining process, fairness, fairness to the members of the Saskatchewan Union of Nurses, whose issues have been recognized by this government; fairness to all health care providers and professionals; fairness to the broader public service; and fairness to the taxpayer of Saskatchewan.

That has been our goal and, Mr. Speaker, I believe we are achieving that goal.

(1630)

And though it's been difficult, though it's been difficult, we will not, we will not forsake the requirement of balance.

Mr. Deputy Speaker, much has been said in this House and elsewhere about the course of events that led us to a province-wide nurses' strike. Negotiations had been proceeding with SAHO, the employer. It became clear to our government that those negotiations were not moving; that they were in fact stalled. We were also acutely aware that the contract expired March 31 and acutely aware that the Saskatchewan Union of Nurses had taken and received support for strike action — had taken a strike vote and had support for strike action.

Knowing the crucial role that nurses play in health care delivery, understanding from the health care administrators in SAHO that the absence of the nursing profession in our health care system could only be tolerated for a very short period of time, knowing the role of nurses and the importance, the Premier of this province offered to meet with the employees, members of SUN, and with the employer, SAHO, to seek a mechanism to find ways to try and bridge the impasse, to bring the parties into discussion, into negotiation, looking towards a fair collective agreement.

Mr. Deputy Speaker, that meeting happened in this building over a period of hours at the end of which time a memorandum had been drafted, at which time the parties were invited to return to review that memorandum and to work on it further, if necessary, in the hopes of securing a collective agreement.

It didn't happen, Mr. Deputy Speaker. For a variety of reasons, it didn't happen. No use pointing fingers. A variety of reasons, it didn't happen. At the end of the process that we're now . . . at the point of the process which we're now in, again. The employers, SAHO, and the employees in the dispute, members of the Saskatchewan Union of Nurses, have reached a point of agreement — again with the Premier — around a memorandum of understanding. Mr. Speaker, Mr. Speaker, there have been changes in that memorandum but not fundamental changes; the fundamental memorandum had been established prior to the strike.

So I want to say, Mr. Deputy Speaker — from my point of view, and I believe from the point of view of the citizens of our province — it was an important, it was an important struggle, an important effort that occurred in the Premier's office, under the auspices of the Premier to try and seek agreement. Because, Mr. Deputy Speaker, not only is it the role of government to seek balance and to seek to be responsible to all services and to the people of our province, it is also the role of government to seek to build bridges, to seek to find compromise between

struggling groups.

It is sometimes the role of the opposition — and I understand this too — to foster conflict, to point to the problems. It is the role of government, Mr. Deputy Speaker, to find solutions, to find compromise and, where it's important, to build bridges.

I saw that, I saw that in what happened in this building with the Premier, the Saskatchewan Union of Nurses, and the Saskatchewan Association of Health Organizations — bridges were being built. And ultimately, Mr. Deputy Speaker, those bridges I believe have resulted in the memorandum of understanding which has brought the nurses back to work and the parties back to the table, which will become the basis for a very fair, negotiated collective agreement.

I do not want to take much more time. I know other of my colleagues want to enter the debate. But I do want to, I do want to point out one or two of the achievements that this very difficult process of a strike, of some very high feelings. I want to achieve . . . or I want to point out what I believe this process in fact has achieved.

Mr. Deputy Speaker, as you might remember — not many others might, but as you might remember — I did spend some time in the portfolio of Health as Minister of Health and I do have some very vivid memories of the now current member from Eastview Saskatoon approaching me on behalf of her colleagues in the nursing profession and making some very passionate arguments for issues that have been very important to nurses, not just in the last year but if I may say over the last five and even ten years.

Mr. Deputy Speaker, as I review this memorandum of understanding which will form the basis for the collective agreement, there are now provisions within this memorandum that nurses in this province have been fighting for for years — important provisions that will improve their workplace and will show significant improvement for patient care in our province.

Mr. Deputy Speaker, within this memorandum of understanding signed by the current president of the Saskatchewan Union of Nurses, signed by the current president of the Saskatchewan Association of Health Organizations, and signed by the current and future Premier of the province, Mr. Deputy Speaker, in this memorandum of understanding are these words, for instance:

The principle of threshold ability or sufficient ability shall govern in job postings, layoff and recall.

For the first time, Mr. Deputy Speaker, the nurses of Saskatchewan will enjoy these provisions of seniority for the first time.

Mr. Deputy Speaker, listen to this. Within this memorandum won through this struggle:

Decisions of the Independent Assessment Committee will be binding.

Mr. Deputy Speaker, we have had in Saskatchewan independent assessment committees that have been formed by nurses and health care providers. To date the results of those committees,

the decisions made by those committees have not been binding. Now they will be binding. A significant goal of the nursing profession over many years has been achieved in this memorandum of understanding.

Here, Mr. Deputy Speaker, a very important issue to many of the nurses that I know and know as friends. This memorandum of understanding reads 8(1) and (2).

SAHO and SUN are committed to the principle of creating more permanent full-time jobs by addressing, among other issues, overtime and sick leave.

Mr. Deputy Speaker, an important, an important issue for the nurses of our province to see more of their positions become full-time positions.

And finally, Mr. Deputy Speaker, I want to refer to another segment of this memorandum of understanding, the segment on recruitment, retention, and quality of care. The new fund which will be set up, the parties have agreed jointly to enter into discussions with Saskatchewan Health regarding the administration of a new fund. And so the parties will jointly administer this fund to address recruitment, retention, and quality of care issues for nurses. And the parties understand that subject to 14 below, Saskatchewan Health will provide \$7.4 million to this fund.

Mr. Deputy Speaker, before I take my place, I'm reminded that there's an old hymn that has within its lyric, words to this effect: "By dross to consume, and thy gold to refine."

We have been through a very fiery period. But out of the fire, Mr. Deputy Speaker, I believe gold is refined. And I believe for all the hurt and all the pain that many of us and all of us have felt — whether we have been a patient, a client of health care, whether we have been a nurse on the picket line, whether we have been called to responsibility in government or in SAHO — through this very difficult time, through this fire, I believe we have refined some gold.

Some of that gold, Mr. Deputy Speaker, is reflected in this MOU (memorandum of understanding), and it will be reflected in the collective agreement. Some of the gold is that we are again beginning to think and debate about the future of health care in our province. Some of the gold, Mr. Deputy Speaker, will be in the new relationships which must be built around collective bargaining. In the relationship between government, SAHO, SUN, and all health care providers, there is gold that has been refined.

And so I am very, very happy to be supportive of the amendment that has been moved and seconded — moved by the member from P.A. (Prince Albert) Carlton, seconded by the member from Battleford-Cut Knife — which calls upon this legislature to offer its word and voice of support to the Premier of this province, to this government for its work throughout this very difficult period of time, to bringing us I think what can be gold for our future.

Thank you very much, Mr. Speaker.

Some Hon. Members: Hear, hear!

Mr. Thomson: — Thank you, Mr. Speaker. It's a pleasure to follow the member from Moose Jaw in his ever well-spoken remarks about the situation we have gone through over the past few weeks, the need for healing, and the foundation that the memorandum of understanding provides in moving along in that direction.

I think that he has laid out a compelling argument as to why this agreement is indeed a fair one. He has certainly laid out a solid argument in terms of why the role of the Premier was an important one.

And I think that he has also laid a good, solid basis for us to continue this debate around the issues that were framed by the member from Cannington and I think the position put forward by the . . . the counter position put forward by the member for Prince Albert.

This dispute was resolved by a strong show of leadership on the part of the nurses' union, on the part of SAHO, and on the part of the Premier. And I think that it's important that we understand that.

It is interesting that the memorandum of understanding that has been now signed is striking in its similarities to what was being discussed that Wednesday before the nurses walked out on to strike. I think that is very important to look at. And I think that speaks very highly of the Premier of this province that he was able to find that middle ground. And perhaps, perhaps we all would have been better off if that Wednesday night parties had signed on and agreed and simply allowed the process to move forward from there.

But none of that detracts the 10 days, 11 days that this province went through and the difficulties. It does not detract from the fact that there were important issues that needed to be moved into the public debate.

The nurses certainly advanced their position, and I think that they put forward some compelling arguments on the problems in the workplace. I think that the work from the Minister of Health and the associate minister was extremely important in terms of showing that the government understands and has realized what does need to be done.

And again the intervention of the Premier both that Wednesday before the strike and in terms of providing the memorandum of understanding, I think has brokered a good deal and a solid deal which will repair not only the situation with nursing, but in fact move ahead the whole situation in health care.

Mr. Speaker, I want to talk though about this question of leadership. And this is an important issue because the members opposite . . . And frankly I found their motion somewhat — and I don't want to overstate it — but somewhat offensive saying they were arrogant.

This is certainly . . . I've heard this from other places. I was reading an article by Verne Clemence in the *Saskatoon Sun* on the 18th of the month. And he says:

The NDP shrugs off public censure and controversy in the belief that it's untouchable, thanks to an opposition in

disarray or in jail.

Well I'm not sure I completely agree with Mr. Clemence. We have not shrugged off the criticisms that have been made about our government. And not all the members opposite are in jail. So in these two areas he's wrong.

We have attempted to listen to what the public had to say, we have attempted to listen to what health care providers have had to say, and we have attempted to act in a manner in the public good.

Mr. Speaker, I think if any of us had the opportunity to have forgone a strike, we would have. I don't know a member in this House, at least on this side, that stood and voted with any joy in their heart as we had to support to Bill 23 because it was the right thing to do. Public safety had to be protected.

The fact that the Premier had intervened at the eleventh hour to try and bring two parties together, to try and find that common ground, I think speaks highly of his determination and his vision and his commitment to this province and to protecting our great gift of medicare.

And it's bothersome to listen to opposition members deride the Premier over his intervention. I think in some ways it shows a naïveté on their part about how the real process of government works. This is not about political gamesmanship. And I've heard the members opposite say that this is good politics for us. I can tell you as a member on this side of the House, I don't think this was good politics. Any time you end up with a labour dispute, particularly in the health care sector, how could we think that that's good politics?

The Minister of Health, I think, put it extremely well in her letter to the president of SUN. And she said:

Today we find ourselves in a situation in which nobody wins. Some patients have found themselves without the care of nurses. Some are being treated in strange surroundings far from home. Others are not receiving the full level of care that they would normally receive. Still others are having medical treatment delayed. We heard you . . .

She goes on to say to the president of SUN, we heard you when the Premier intervened to try and bring the two sides closer. That's what leadership is about. That's what leadership is about. It's about attempting to bring two parties together to find a compromise.

On the part of this administration I think it was very positive that the Premier was able to make the commitments that there was additional money to deal with workplace issues. It's certainly something that we have been chided for. There was a sense, I think, from the opposition that they had wished that things had gone worse for us. The fact that we were able to find the resolve . . . the fact that we were able to find the resolve, I think, is good for all people involved, and best in particular for the people of Saskatchewan.

But it does beg the question: if it had not been this particular Premier, what would have happened? If it had been one of those

other two would-be premiers, what would the situation have been?

Well let's look at their . . . During a time of — and I don't like to use the word because it is overused and I think it demeans its value — but in a time of crisis, in a time of significant challenge, let's look at what happened with the opposition. What was their alternative?

In 10 days we heard not a word, not word one from the Leader of the Tory Party — not a word. Not one phone call. Not one press release., Not one statement publicly.

You have to ask yourself, where was the Leader of the Saskatchewan Tory Party? Where was he? This is a man who says that he should be the premier of Saskatchewan, that he has a right to take that chair three rows in front of me and one row over. That's what he says he has a right to and, yet in a time when people of this province are asking for leadership, where is he? To this day, we don't know. To this day, the members opposite will not tell us where their leader was during this time of strife.

Where was Elwin Hermanson? He certainly wasn't leading. He certainly was not providing leadership nor was he providing a clear alternative . . . (inaudible interjection) . . . Well the member for Canora has a lot to say now. But the question is: where was your leader? Mr. Speaker, I'm not sure where he was.

But it is interesting and I think it's instructive that in a time when the people of Saskatchewan are coming to make a decision about what is right and what is wrong, what they support and what they don't, what the alternatives are, Elwin Hermanson was nowhere to be seen. The man who says that he should lead this province could not even lead his own party in a time of strike.

Well I'm not sure which is worse. Perhaps he'd seen the trial balloon floated out by Mr. Melenchuk. The Liberal leader saw that it was a lead balloon and decided he'd just stay quiet.

Because I can tell you, Mr. Speaker, it was disturbing at best to hear the Liberal leader come out and raise the issues that he did, in the manner that he did, in a way that showed that he had thought through this issue not at all. Because I do not believe that any leader, any man or woman who would want to serve in this Legislative Assembly could condone breaking the law.

I notice the member from Melville getting ready to leave. And it's interesting because I would have thought that a former RCMP officer, I would have thought with the good legal counsel from the member for North Battleford that that Liberal leader would understand the law is the law. And we may disagree in this House about what should become a law, but once the democratic representatives have voted, once the Lieutenant Governor has given his Royal Assent, once the Bill is proclaimed, it is the law.

And the fact that the courts themselves reviewed it, dealt with the injunction, and ordered the nurses back to work, and that that was defied, it's unfortunate. But it is reprehensible that the Leader of the Liberal Party would in any way condone such

action.

I just find this passing strange that the Liberal Party, a party that certainly once was elected as the official opposition not that many years ago, now finds itself in a third party position. I find it distressing that that party's leader should suggest lawlessness as he prepares to take over, supposedly, which fortunately the electorate will not give him the opportunity. But in his province of Saskatchewan that's what he would be advocating if he were Premier. I think that's a sad comment. I think it's a very unfortunate thing that this is what we have come to in this House.

It is not a case of arrogance on our part. It is unfortunately a burden of responsibility that we are charged with making and passing laws. We debate them. We certainly go through a great deal of agony in terms of deciding an appropriate course of action, but once those decisions are taken, they're taken.

I think it is most unfortunate that the Conservative leader was nowhere to be seen. I think it was unfortunate that the Conservative members voted against it and then stand up pretending to support trade unionism forgetting, of course, that they have two Bills on the order paper which we've yet to see introduced. Two Bills: the trade union amendment Act, or is it the trade union democratization Act?

Whichever it is, we know what its purpose is. Its purpose is to allow the unions to be broken. Let's not forget the right-to-work Bill. We know what the right-to-work Bill is about. We haven't seen it introduced; they were afraid to introduce it in this House. The right-to-work Bill from the Tories will allow the unions to be broken.

They stand and they want to sing "solidarity forever", but we know the only solidarity they have is with Mike Harris and that is not a pretty picture.

Mr. Speaker, there may be — there may be disagreements within the labour movement, there may be disagreements internally within the New Democratic Party, but I want to tell you, both of those are democratic institutions. Both of those will take the positions that they need to. I also want to tell you that within this caucus there was no division. Every single member did what they needed to do. There was a lot of debate. It was with heavy heart but we acted in the public interest.

The result, as the member from Moose Jaw outlines, was that we came forward with an agreement which provides the basis for healing in health care. It provides for a fair wage settlement. It provides for significant enhancements to benefits. It provides for significant improvements to working conditions.

That would not have happened if Mr. Melenchuk was continuing to break . . . advocate that we break the law. This would not have happened if . . . perhaps in retrospect Mr. Melenchuk wishes he had simply left himself chained to the doors of the Plains hospital. It was probably the safest place for him to be during that dispute.

I can tell you it would not have happened if Elwin Hermanson were the Premier of Saskatchewan because we wouldn't have seen Elwin Hermanson for 10 days. He would have been

nowhere in sight. You have to ask yourself, is that really what we want in a provincial government?

At a time of crisis, at a time when we reach the fork in the road, people want leadership. This Premier, this government, right or wrong, provided it. The opposition provided no leadership.

And I think in a lot of ways . . . The members opposite say that they think now that we should proceed directly into an election. Mr. Speaker, I will tell you this. The Premier will call an election when he figures it's the right time for the province to have an election. But if that election is now, I will campaign proudly on behalf of the New Democratic Party, and I will campaign proudly on behalf of this Premier because — the member for Canora will want to hear this — the reason is that this Premier and this government provided leadership at a time when leadership was needed.

Some Hon. Members: Hear, hear!

Mr. Thomson: — Well the member for Canora says we should check with the public. He didn't bother checking with his public when he switched sides of the House. He didn't bother checking with the public when he signed the Tory platform after running on a Liberal platform. That's not what that member believes. It's a nice idea to say he does, but it isn't the case.

Mr. Speaker, I have a great number of other things I would be willing to say, but I think at this point I would simply move to adjourn debate.

Debate adjourned.

The Assembly adjourned at 4:56 p.m.

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